



Making Social Care  
Better for People

Inspecting for better lives

# Key inspection report

## Care homes for older people

|                 |  |
|-----------------|--|
| <b>Name:</b>    | Chilterns End  |
| <b>Address:</b> | Greys Road<br>Henley On Thames<br>Oxfordshire<br>RG9 1QR |

The quality rating for this care home is:

two star good service

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>    |
| Marie Carvell          | 0 7 0 5 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)

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

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

## Reader Information

|                     |  |
|---------------------|--|
| Document Purpose    | Inspection report  |
| Author              | CSCI   |
| Audience            | General public   |
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## Information about the care home

|                       |  |
|-----------------------|--|
| Name of care home:    | Chilterns End  |
| Address:              | Greys Road<br>Henley On Thames<br>Oxfordshire<br>RG9 1QR |
| Telephone number:     | 01491574066  |
| Fax number:           | 01491574633  |
| Email address:        | manager.chilternsend@osjctoxon.co.uk                     |
| Provider web address: |  |

|  |                                  |
|--|----------------------------------|
| Name of registered provider(s):            | The Orders Of St John Care Trust |
| Name of registered manager (if applicable) |                                  |
| Ms Sally Ann Cross                         |                                  |
| Type of registration:                      | care home                        |
| Number of places registered:               | 46                               |

| Conditions of registration:                    |                                   |         |
|--|-----------------------------------|---------|
| Category(ies) :                                | Number of places (if applicable): |         |
|  | Under 65                          | Over 65 |
| dementia                                       | 46                                | 0       |
| old age, not falling within any other category | 0                                 | 46      |
| physical disability                            | 46                                | 0       |

### Additional conditions:

The maximum number of service users who can be accommodated is 46.

The registered person may provide the following category/ies of service only: Care home only (PC) To service users of the following gender: Either Whose primary care needs on admission to the home are within the following categories: Dementia (DE) Old age, not falling within any other category (OP) Physical disability (PD)

|                         |  |  |  |  |  |  |  |  |
|-------------------------|--|--|--|--|--|--|--|--|
| Date of last inspection |  |  |  |  |  |  |  |  |
|-------------------------|--|--|--|--|--|--|--|--|

### Brief description of the care home

Chilterns End is a purpose built care home that was purchased by The Orders of St John Care Trust from Oxfordshire Social Services in the latter part of 2001. The home provides accommodation and care for a maximum of 46 older people over the age of 65, some of whom may be mentally or physically frail. The home also provides day care and 'respite' short stays for a small number of people.

## Brief description of the care home

The accommodation is provided in single rooms in a one-storey building. Chilterns End is set in its own grounds on the outskirts of Henley-on-Thames and is close to local health centres, shops and Townlands, the community hospital.

The home has four units, each with its own kitchenette, dining and sitting rooms and there is also a large main dining room. Each unit has assisted toilets, bath and shower facilities.

The building surrounds a central garden with a sensory area, planted with herbs and aromatic plants and a water feature. The garden and grounds have a range of garden seating and shaded areas, with easy access for residents from most areas of the home.

The fees for this service range from 505.00 pounds per week to 800.00 pounds per week. Items not covered within the fees include hairdressing, podiatry, newspapers and magazines, toiletries and contributions to some outings and activities.

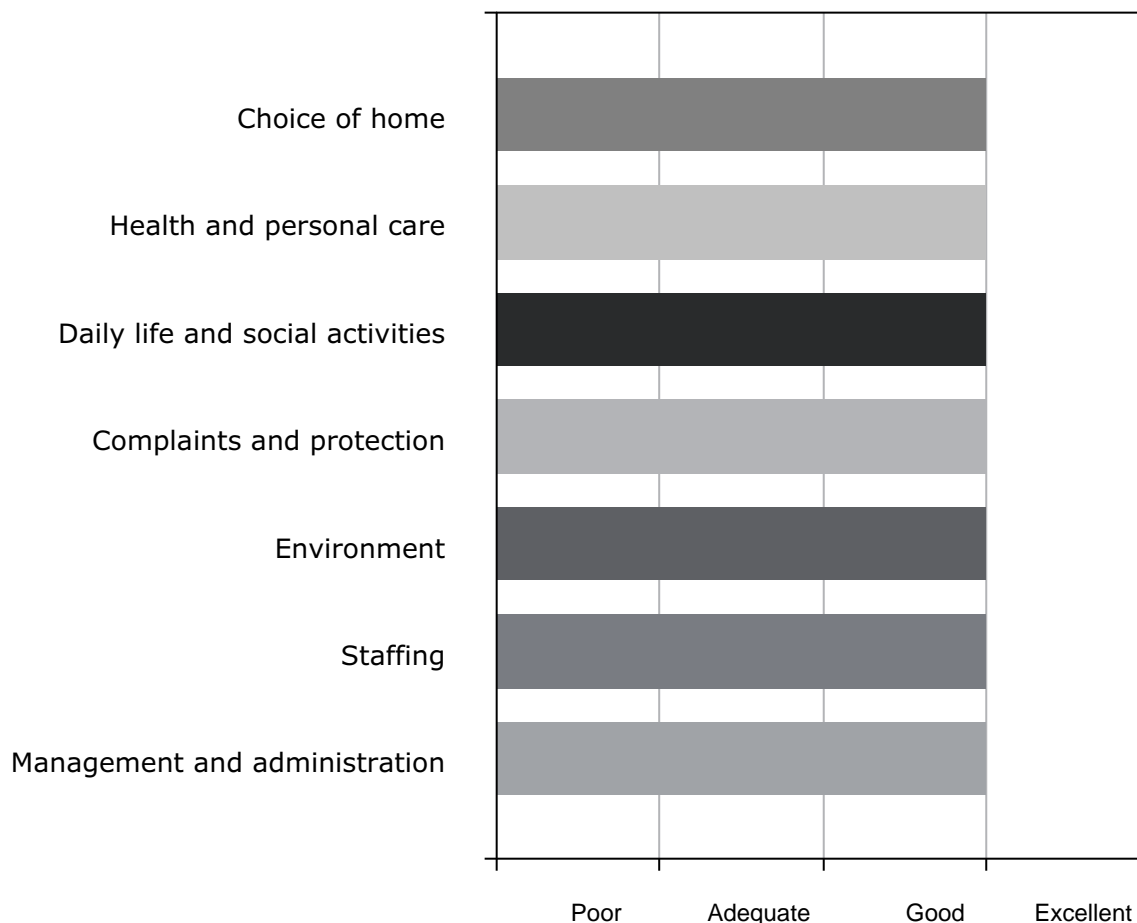
## Summary

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 last inspection of this service was completed in June 2008. This inspection of the service was an unannounced Key inspection. We ( the commission) arrived at the service at 10.15am and were in the service until 6.30pm. It was a thorough look at how well the service is doing. It took into account detailed information provided by the manager, Sally Cross in April 2009 and any other information that we have received about the service since the last inspection.

We looked at how well the service is meeting the standards set by the government and have in this report made judgements about the standards of the service. We toured the premises, examined a sample of records required to be kept in the home, including the case tracking of service user files and spent time talking to service users in private and

communal areas of the home. We also spent time talking to the manager and staff on duty. In addition we observed how care was being delivered to service users and joined service users in one unit for the midday meal.

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

Prospective service users and their representatives are encouraged to visit the home before making a decision to move in for a trial period.

Service users expressed their satisfaction of living in the home and being enabled to remain independent for as long as possible.

Service users are confident that any complaints will be listened to, taken seriously and acted upon.

The home is clean, well maintained and free from odours.

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

The registered manager has been in post since October 2008 and registered as manager with the commission in February 2009. Her appointment has made a positive impact on the management of the home, service user care and staff morale.

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

Care planning documentation is currently being piloted by the Trust.

All care staff require training in the management of service users with the medical condition Diabetes Mellitus.

Sluice facilities need to be reviewed. Measures to prevent the potential risk of cross infection need to be robust.

No requirements were made at this inspection.

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.cqc.org.uk](http://www.cqc.org.uk). You can get printed copies from [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.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.

Service users are provided with sufficient information to make an informed choice about moving into the home for a trial period.

Service users are provided with a written contract/terms and conditions.

All prospective service users are assessed prior to admission to ensure that the home is able to meet their needs.

Evidence:

All prospective service users are provided with information about the home, including the home's brochure, service user guide and a copy of the home's most recent inspection report. Oxfordshire County Council have a block contract with the home for twenty one of the forty six beds. Service users spoken to confirmed that they had received enough information about the home before moving in for a trial period.

Evidence:

Several service users said that they had chosen the home because of knowing other service users, had stayed in the home for respite care or had previously visited the home.

The manager or head of care undertake a comprehensive pre- admission assessment of all prospective service users to ensure that the home is able to meet their needs. This was well documented on service user files.

Service users are provided with a contract/terms and conditions and this was confirmed in discussion with service users and from examination of service user files. The information in the contracts/ terms and conditions, is to be reviewed by the Trust.

## 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.

Care plans need to be in sufficient detail regarding lifestyle choices and the preferences of the service user with regard to how care is to be provided and when. Care plans need to be developed to include how emotional, psychological and social care needs of service users are identified and met.

The healthcare needs of service users are fully met.

Medication administration, recording and storage are maintained to a high standard.

Service users are treated with dignity and respect.

Evidence:

Care plans are drawn up from the pre-admission assessment, agreed and signed by the service users and/or their representative, as appropriate. Information regarding health and personal care is well documented. However, care plans do not evidence how the service users emotional, psychological, or social care needs are identified and

## Evidence:

met. Care plans are not in sufficient detail regarding lifestyle choices or the preferences of the service user with regard to when care is to be provided and when, this was discussed with the manager. This is currently being addressed by the Trust and new care planning documentation is being piloted in several of the Trust homes and will be in place in all homes by the end of June following staff training.

Service users were observed to be well groomed and appropriately dressed, attention had been given to ensuring that service users have their spectacles, dentures, hearing aids and walking frames/sticks.

The healthcare needs of service users are provided by a local GP practice and a range of healthcare professionals visit the home on a regular basis. From discussion with service users, staff on duty and the manager, the healthcare needs of service users are fully met. This was confirmed by service users and the manager and staff on duty expressed their appreciation of the support from the district nurses who visit the home, several times a week.

Three service users have Diabetes Mellitus, one service user requires daily injections of Insulin. In discussion with staff on duty, it was confirmed that none of the care staff have received any training in this medical condition. It is a good practice recommendation of this report that training is provided to all staff.

Medication is administered by care staff who have completed medication training and the training follows the commissions guidance on the " Training of care workers to safely administer medication in care homes". Additional good practice advice from the commissions pharmacist inspector for the region is that medication administrative training should be provided by a credible source, for example a registered nurse or pharmacist. The manager has verbally agreed to address this as soon as possible. Recording of medication administered including controlled drugs and " when required " medication were seen to be well maintained, up to date and with no obvious gaps in recording. Storage was well organised as was stock control. Medication such as eye drops, clearly recorded the date when opened. Guidelines for the administration of "when required" medication will be supported by a care plan, following the implementation of new care planning documents.

Time was spent talking to service users in private and communal areas of the home. Service users expressed their satisfaction of the care provided, the facilities available, the staff team and changes made since the appointment of the new manager. Service users said that their friends and families were always made welcome and offered refreshments.

Evidence:

Staff were observed to interact with service users in a calm, respectful and kind manner. Service users confirmed that they are always addressed by their preferred name and in discussion with staff on duty, they were clear about the need to respect service users privacy and dignity. In discussion with service users and staff on duty, all were clear about the role of the key worker in the home.

As in many other care homes, there is a wide range of racial, ethnic and faith backgrounds represented within the staff team compared with the current service users. From discussion with the manager, we consider that the home is able to provide a service to meet the needs of individual service users of various religious, racial or cultural needs.

## 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.

Service users are encouraged to make choices and to remain independent for as long as possible. Service users are encouraged to exercise choice and control over their daily lives.

A range of activities and community involvement is made available to meet the social needs of service users.

Service users are provided with a varied, nutritious and wholesome diet.

Evidence:

Two part time activity organisers are in post, one has specific responsibility for service users attending day care in the home. Information about events, outings and activities are displayed on notice boards in each of the units. Activities include bingo, board games, gardening projects, day trips and professional entertainers visiting the home. Service users expressed their appreciation of the entertainment provided the previous day, which was a sing a long and provided by an professional entertainer. Although a wide range of activities take place, this was not evidenced in service user care plans or daily records. The manager confirmed that this will be addressed with the introduction

## Evidence:

of the new care planning documentation. Assistance is given to service users wishing to attend local clubs and societies. One service user expressed a wish to find someone in the local community to play chess with, the manager has agreed to contact local groups.

Service user meetings take place regularly and these are attended by the manager. In addition the manager visits each unit daily to chat to service users and regularly joins service users for the midday or evening meal. This is part of the home's quality monitoring procedures and gives the manager the opportunity to spend time with service users. This was confirmed by service users.

Many of the service users originate from the local area or have family and friends living locally, who are able to visit on a regular basis. Service users confirmed that visitors are made welcome and for a small charge, may stay for a meal. The home has good established links with local schools, churches and voluntary groups.

Service users confirmed that the routines are generally flexible in the home, such as being able to decide how to spend their day, when to go to bed or when to get up.

We (the commission) were able to join service users in one unit for the midday meal. The menu was displayed and demonstrated a choice of main course. Service users described the quality and choice of meals as "quite good", "variable, depending on who is cooking", "generally OK". The meal was hot, tasty and attractively served. Service users were assisted as necessary in a dignified and attentive manner by care staff. Menus demonstrated that service users are provided with a varied, nutritious and wholesome diet. Since the last inspection, protected mealtimes have been introduced to ensure that all staff, including senior staff are able to assist service users, monitor food quality and ensure that meal times are a relaxed event in the home.

## 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.

Service users are confident that any concerns or complaints will be taken seriously, listened to and acted upon.

Policies and procedures are in place to protect service users from possible abuse.

Evidence:

The home's complaints procedure is displayed in prominent places throughout the home. The manager confirmed that all complaints are recorded, whether received verbally or in writing. The recording of the two complaints received since the last inspection were seen to be clear, detailed and included action taken and outcomes. The manager said that she welcomed constructive comments/ complaints as this is a valuable monitoring tool. Service users were clear about the procedure for reporting concerns or complaints, and confirmed that they would speak to the manager and were confident that their concerns would be taken seriously, listened to and acted upon. Since the inspection the manager has confirmed that a comments and suggestions book has been placed in the entrance hall and service users and visitors will be encouraged to use this book.

Since the last inspection we have not received any information regarding complaints about this service.

Evidence:

All staff receive training in the home's safeguarding procedures including whistle blowing, during their induction training and routinely discussed at staff meetings. This was discussed with staff on duty, who were clear about the procedures and confirmed that the procedures had recently been discussed at a team meeting. Safeguarding training was evidenced in staff training records.

No safeguarding adult referrals or safeguarding adult investigations have taken place since the last inspection. No referrals have been made for inclusion on the Protection of Vulnerable Adults list (POVA). The home has a copy of the Oxfordshire safeguarding adults procedures, which is available to all staff.

## 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 and gardens are maintained to a high standard. The layout and location is suitable for its stated purpose.

The home was found to be fresh, clean and free from unpleasant odours.

Sluice facilities need to be reviewed. Measures to prevent the potential risk of cross infection need to be robust.

Evidence:

The home is a purpose built building on one level. The layout and location of the building is suitable for its stated purpose. Service users expressed their satisfaction of the premises, garden and facilities available. The home is well maintained and there is an ongoing programme of redecoration and maintenance.

The housekeeping team and maintenance person work extremely hard and take pride in maintaining the home to a high standard. The home was found to be fresh, clean and free from unpleasant odours. However, it was noted during the tour of the premises that sluice facilities are limited, including the need for staff to manually empty and clean commode pots. Measures to prevent the potential risk of cross contamination and the spread of infection need to be robust. This was discussed with

Evidence:

the manager and advised to obtain a copy of "Infection Control in Care Homes". Following the inspection we received an action plan, advising that the manager would be contacting the Trust surveyor to discuss possible solutions and budget implications.

## 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.

Staffing levels appear to be adequate to meet the needs of the service users.

Recruitment procedures are robust.

Staff are well trained and are able to carry out their roles with confidence.

Evidence:

From discussion with the manager, staff on duty, examination of duty rosters and observation, staffing levels appear to be adequate to meet the needs of the service users. Since the last inspection approximately twenty members of staff have resigned, due mainly to retirement, long term sickness or moving from the area. The majority of these posts have been filled or are currently being recruited. Each shift consists of five/six care assistants and a care leader. At night there are two care assistants and a care leader sleeping in on the premises, to assist in an emergency. From June 2009 this will change to three care assistants on waking night duty.

Members of staff are encouraged to undertake National Vocational Qualification (NVQ) training. Currently twenty two care staff have achieved NVQ level II, three are working towards the qualification and eight have been nominated for a place. All catering, housekeeping and maintenance staff have completed appropriate NVQ qualifications.

## Evidence:

From examination of a sample of staff personnel files, the home's recruitment procedures are robust. One file of a recently recruited member of staff did not contain a reference from their most recent employer. The manager agreed to address this during the inspection and following the inspection we received an action plan confirming that this issue had been addressed in line with the Trust recruitment policy.

The home has a staff training and development programme in place. All staff undertake induction training, appropriate to their role once in post, complete mandatory training and specialist training as appropriate. Training files were well organised and the home has a system of identifying when mandatory training needs updating. Staff spoke positively about the training provided and felt that this gave them confidence in carrying out their roles and assisted with future career opportunities. Staff were observed to be carrying out various tasks including dealing with visitors to the home in a confident and professional manner. From discussion with staff on duty and observation, we consider that staff morale in the home is good.

## 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.

Service users benefit from a well managed home.

Evidence:

The manager, Sally Cross has been managing the home since October 2008 and registered as manager with the commission in February 2009. Her appointment has made a positive impact to the management of the home, service user care and staff morale. She is well supported by an experienced administrator and four recently recruited care leaders. In discussion with service users and staff on duty all expressed their satisfaction about the way the home is being managed. Service users said that she always made herself available when asked and visits each unit every day for a chat. Staff described the manager as a good communicator, fair but firm and approachable. Staff said that they feel well supported by the manager.

Policies and procedures are in place and are reviewed on a regular basis. Procedures for dealing with service users monies and valuables are kept in line with Trust

## Evidence:

procedures.

Communication systems are well organised with regular staff meetings taking place, currently monthly staff meetings are taking place. Staff handovers take place at the beginning of each shift change.

Reports written by one of the operations managers or responsible individual are completed following an unannounced visit to the home each month, reports were available for examination. Quality assurance systems are in place and the manager undertakes regular audits. Evidence was seen to demonstrate that the views of the service users are obtained to measure the home's success in meeting the aims, objectives and statement of purpose.

A sample of records relating to health, safety and welfare were examined and found to be well maintained and up to date. The home's fire board containing a list of service user names and bedroom allocation was not up to date, this was addressed during the inspection and following the inspection we received an action plan confirming that an updated procedure has been put into place to ensure that the information recorded on the fire board is accurately maintained.

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 |
|-----|----------|------------|-------------|----------------------|
|-----|----------|------------|-------------|----------------------|

### 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 |
|-----|-------------------|-------------------------------|
|-----|-------------------|-------------------------------|

## Helpline:

**Telephone:** 03000 616161 or

**Textphone:** or

**Email:** [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

**Web:** [www.cqc.org.uk](http://www.cqc.org.uk)

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