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Mr N Dykes
Belong Macclesfield
Kennedy Avenue
Macclesfield
SK10 3DE

23rd August 2010

Ref: 2000084960

Dear Mr Dykes

**Care Quality Commission
Care Standards Act 2000 – Final Random Inspection Report – Belong
Macclesfield**

Please find enclosed our final inspection report following our recent inspection of your service.

We believe this report to be factually accurate and will publish it.

You should make sure that people who use your service, and those who are thinking of using it, are able to see a copy of the report. You should also make the report available to carers, staff, placing authorities and, where appropriate, other interested parties.

You can get more copies of the report by:

- Telephoning the order line on 0870 240 7535, or
- Downloading or ordering online at www.cqc.org.uk

If you need to contact us please quote the above reference number.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Val Flannery'.

Val Flannery
Regulatory Inspector

Enclosures: Final Report

We welcome your feedback to help us improve our service.
Please feel free to contact the National Contact Centre on
03000 616161

Random inspection report

Care homes for older people

| | |
|----------|--|
| Name: | Belong Macclesfield |
| Address: | Kennedy Avenue Macclesfield SK10 3DE |

| | |
|---|-----------------------|
| The quality rating for this care home is: | two star good service |
| The rating was made on: | |

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 review of the service. We call this review a 'key' inspection.

This is a report of a **random inspection** of this care home. A random inspection is a short, focussed review of the service. Details of how to get other inspection reports for this care home, including the last key inspection report, can be found on the last page of this report.

| | |
|-----------------|-----------------|
| Lead Inspector: | Date: |
| Val Flannery | 1 8 0 5 2 0 1 0 |

Information about the care home

| | |
|-----------------------|--|
| Name of care home: | Belong Macclesfield |
| Address: | Kennedy Avenue Macclesfield SK10 3DE |
| Telephone number: | 01625508700 |
| Fax number: | |
| Email address: | sam.buxton@belongmacclesfield.org.uk |
| Provider web address: | |

| | |
|--|---------------------------|
| Name of registered provider(s): | CLS Care Services Limited |
| Name of registered manager (if applicable) | |
| Ms Samantha Jane Buxton | |
| Type of registration: | care home |
| Number of places registered: | 72 |

| | | |
|--|-----------------------------------|---------|
| Conditions of registration: | | |
| Category(ies) : | Number of places (if applicable): | |
| | Under 65 | Over 65 |
| dementia | 72 | 0 |
| old age, not falling within any other category | 0 | 72 |

| |
|--|
| Conditions of registration: |
| The maximum number of service users who can be accommodated is:72 |
| The registered person may provide the following categories of service only. Care home with Nursing - code N, to people of the following gender:- Either. Whose primary care needs on admission to the home are within the following categories: - Old age not falling within any other category - Code OP. Dementia - Code DE. |
| Date of last inspection |
| Brief description of the care home |
| Belong is a care home providing personal care and nursing care for up to 72 older people. The home opened in 2007 and is managed by CLS Care Services Limited, a not for profit organisation based in the North West of England. The home is situated on the |

Brief description of the care home

outskirts of Macclesfield in a residential area. Local community amenities such as shops, a pub and a bus stop are within a short walking distance. The home consists of six households for either 11 or 13 people. Each unit has a lounge, dining area and fully fitted kitchen. All bedrooms are single occupancy with en-suite shower and toilet. There are also communal facilities that are shared with adjoining sheltered housing apartments. Details about fees are available from the manager.

What we found:

This random inspection was carried out by two inspectors on 18 May 2010 and took four hours. The purpose of the inspection was to see if the personal and health care needs of the people living in the home were being met in a way that meets their individual needs and preferences. We also looked the procedures that are in place within the home for dealing with complaints, and with safeguarding the people who live there from abuse and harm.

During our visit we saw the care folders of three people who live in the home. These showed the level of help they needed from staff to ensure their personal and health care needs were being met. Information was included in the plans of care about the level of support the people required with personal care such as using the bathroom and toilets, dressing and undressing and moving about the home. The care plans also showed how people living in the home were being supported with their medication and with doctors and hospital appointments. There was information in the care folders about each person's specific health care needs and the action staff should take to ensure the person's safety and well being. We saw risk assessments that included ensuring the safety of the people who live in the home when staff were helping them with their mobility and to prevent falls. We also saw risk assessments for people who required additional support and help with their care needs because of the on going changes to their personal and health care needs.

We were told that the people living in the home need help to make sure they take their medication safely as prescribed. The record of the medication administered by staff to the people who live in the home was seen and was satisfactory. Each person's medication is kept in secure cabinets in a locked cupboard in their bedroom. During our visit we looked at three bedrooms and saw that the medication cabinets were locked and that the people's medication was stored in the cabinets. We spoke with the manager about the changes to the requirements regarding the storage of controlled medication and the action they should take to ensure they are following recent guidelines.

During our visit we saw a copy of the complaints procedure and a record of complaints received by the home since our last visit there. The copy of the complaints procedure on display in the entrance area to the home did not have up to date details about the registered manager or how to contact the Care Quality Commission. The manager assured us that the complaints procedure would be updated to show the correct information. Two complaints were recorded in the complaints record and the record showed us that these had been dealt with satisfactorily by the home. The procedure seen for investigating complaints shows that people raising complaints could be confident these would be taken seriously and acted upon.

There is a safeguarding adults policy for the home and the procedures in place include the Department of Health guidelines 'No Secrets'. We were told by the manager that there were no safeguarding issues from the home being investigated at the time of our visit. The staff training record we saw during our visit showed that not all staff had received up to date training on safeguarding adults. After our visit, the person with responsibility for staff training in the home confirmed to us that all staff would have received up to date training on safeguarding adults by the end of June 2010.

During our visit we saw that, since our last inspection, menus were being displayed to show people living in the home the choice of meals available. Staff told us that alternatives can be offered if people did not like the choices available at any meal. Staff also confirmed that the concerns we found at our previous visit about them wearing protective clothing whilst preparing meals had been resolved.

What the care home does well:

During this visit we found that the care plans for people living in the home identified all their personal and health needs and included information for staff to make sure those needs were met in the way that each person preferred. We found that the medicines were being well managed and securely stored to help make sure that each person received their medicines as prescribed by their doctors.

We also found that complaints were being dealt with satisfactorily at the home so that people living there and their relatives could be confident that their concerns would be listened to and acted upon.

What they could do better:

The minor concerns we found at this visit in relation to the complaints information and updated safeguarding training for staff were dealt with during the 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 2.

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, 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, 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 |
|----|-------------------|-------------------------------|
| | | |

Reader Information

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|----------------------|--------------------------------------|
| Document Purpose: | Inspection Report |
| Author: | Care Quality Commission |
| Audience: | General Public |
| Further copies from: | 0870 240 7535 (telephone order line) |

Our duty to regulate social care services is set out in the Care Standards Act 2000. Copies of the National Minimum Standards –Care Homes for Older People can be found at www.dh.gov.uk or got 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

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