



*Making Social Care
Better for People*

inspection report

RESIDENTIAL FAMILY CENTRE

St Michaels Fellowship 52 Palace Road

**52 Palace Road
Tulse Hill
London
SW2 3NJ**

Lead Inspector
Sue Grindlay

Unannounced Inspection
4th January 2007 9:00

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
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Reader Information

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Residential Family Centres*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

Every Child Matters, outlined the government's vision for children's services and formed the basis of the Children Act 2004. It provides a framework for inspection so that children's services should be judged on their contribution to the outcomes considered essential to wellbeing in childhood and later life. Those outcomes are:

- Being healthy
- Staying safe
- Enjoying and achieving
- Making a contribution; and
- Achieving economic wellbeing.

In response, the Commission for Social Care Inspection has re-ordered the national minimum standards for children's services under the five outcomes, for reporting purposes. A further section has been created under 'Management' to cover those issues that will potentially impact on all the outcomes above.

Copies of *Every Child Matters* and *The Children Act 2004* are available from The Stationery Office as above.

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SERVICE INFORMATION

Name of service St Michaels Fellowship 52 Palace Road

Address 52 Palace Road
Tulse Hill
London
SW2 3NJ

Telephone number 020 8671 1252

Fax number 020 8674 5016

Email address fifty.two@zetnet.co.uk

Provider Web address

Name of registered provider(s)/company (if applicable) St Michael's Fellowship

Name of registered manager (if applicable)

Type of registration Residential Family Centre

No. of places registered (if applicable) 6

Category(ies) of registration, with number of places

SERVICE INFORMATION

Conditions of registration:

1. St Michael`s Fellowship be registered to carry on a Residential Family Centre, called 52 at 52 Palace Road, Tulse Hill, SW2 3NJ for a maximum of 6 young women aged 15 to 22 years and their babies/young children, up to a maximum of 8.

Date of last inspection 20th May 2005

Brief Description of the Service:

52 Palace Road is a family assessment centre, one of five houses managed by St Michael's Fellowship. The St Michael's Fellowship is an established charity that promotes the protection and development of children by educating and supporting young mothers to develop good parenting skills. The parent's capacity to respond to the children's needs and to safeguard their welfare is assessed and the parents are given such advice and guidance as is considered necessary to enable them to do so. The stated aims include providing fair, objective and comprehensive assessments of families to assist local authorities and the courts in making decisions for the welfare of the child. The premises comprise a large spacious detached house with six individual bed sitting rooms, each having its own kitchenette. Communal space includes a large lounge and playroom and garden with play area. An additional kitchen is also located on the ground floor and is used for teaching sessions and for occasional communal meals.

SUMMARY

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

The inspector visited without prior notice in the week after the Christmas break. The manager and three staff members were spoken with. All three young women were on site during the inspection, and all three were spoken with. A tour was made of all the communal facilities, and several bed sitting rooms were seen. Records were looked at regarding complaints, daily logs, fire drills and placement plans. Staff files were viewed at the company's head office the following day.

What the service does well:

St Michael's offers a comfortable, safe and secure environment for young parents to develop their parenting skills whilst undergoing assessment. Residents' comments about their stay included the following:

"I think the rules are fair given what we're here to do".

"I thought they wouldn't be so nice – I thought they'd be watching me 24/7".

The Residents' handbook is a comprehensive but easy to read document answering the sort of questions young people might have when they come into the centre. Residents are well informed about the process of the assessment, and written plans outline the tasks to be undertaken. Records were up to date, identified by their authors, and available for the residents to read what is written about them on a daily basis, and challenge the reports if they wish to do so.

The manager and staff are well qualified for the job they do, and relationships with the residents are generally positive. One resident commented on the staff, saying:

"Most of them are really lovely".

What has improved since the last inspection?

A new manager has been appointed, and she has introduced new systems to the centre, which have made things run more smoothly. Staff have responded to her management style, which has let them know that she is prepared to do anything she asks someone else to do. One professional said that the manager had introduced, *"minor changes that make a difference"*, and made the centre, in her words, *"more of a home"*.

What they could do better:

Maintenance work should be done more speedily, and this appears to be a frustration for staff. Hot water should be maintained at a safe temperature to prevent scalding. All minor complaints should be logged to show that the centre staff are responsive to the residents' needs. Staff records should contain up to date criminal records bureau checks for all adults living or working on the premises. The manager should be registered with the commission without delay.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office.

DETAILS OF INSPECTOR FINDINGS

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Being Healthy

The intended outcomes for these standards are:

- Families have access to health care, education, employment and leisure activities which promote their good health and well being, including their mental health, in a safe environment.(NMS 4)

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

4

Residents at St Michael's have access to regular health checks, and their health and wellbeing and that of their babies is promoted. Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

Standard 4 Residents coming to stay at the centre register with a local G.P. practice. The centre has a link with a local health visitor, who comes to the centre every Thursday to see the residents and their children. Monitoring the health and development of the babies is an important part of the assessment process, and residents are strongly advised to take advantage of this service. The health visitor fills in the red book, which is the record of growth and development, and gives advice as appropriate. She also gives each resident a copy of a Department of Health publication entitled, "*Birth to Five*", with accessible information about the child's development during this crucial period. A member of staff sits in on the discussion to record any specific advice, and this information is added to the resident's file. The health visitor said that staff were approachable, took advice on board, and kept her well informed about meetings and conferences. Residents are also advised to attend the baby clinic in Streatham on Tuesdays. The centre invites professional health workers to the centre every six weeks to give presentations to the residents, and run workshops on sexual health, drugs and alcohol and domestic violence. A notice board near the telephone on the first floor has details of local one o'clock clubs.

Staying Safe

The intended outcomes for these standards are:

- Parents and children enjoy a level of comfort and security within the centre based on mutual respect and an understanding of what may have an adverse effect on other residents.(NMS 8)
- The privacy of parents and children is respected and information about them is handled with appropriate confidentiality.(NMS 9)
- Parents and children are able to complain if they are unhappy with any aspect of the centre. They are confident that any complaint will be taken seriously, investigated and addressed without delay and they will be kept informed of the progress.(NMS 10)
- The welfare of children is promoted, children are protected from abuse, and an appropriate response is made to any allegation or suspicion of abuse.(NMS 11)
- Families are protected from abuse, neglect and self-harm.(NMS 12)
- All significant events relating to the protection of children or vulnerable adults within the centre are notified by the registered person to the appropriate authorities.(NMS 13)
- There is careful selection and vetting of all staff and anyone else resident on the premises.(NMS 15)
- Parents and children stay in accommodation that provides physical safety and security.(NMS 22)
- Parents and children enjoy a level of comfort and security within the centre based on mutual respect and an understanding of what may have an adverse effect on other residents.(NMS 8)

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

8, 9, 10, 11, 12, 13, 15 and 22

St Michael's offers a comfortable, safe and secure environment for young parents to develop their parenting skills. Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

Standard 8 All visitors to the centre are asked to sign in. Residents who wish to receive visitors are asked to obtain the agreement of the social worker, and the names are put on an 'Approved Visitors' list. No visitors are allowed into individual bed sits. Residents are given an agreement at the start of the

placement and the rules are clearly spelt out. One young person said, *"I think the rules are fair given what we're here to do"*. Another has responded well to a reduction in the degree of supervision for preparing feeds. She said, *"I thought they wouldn't be so nice – I thought they'd be watching me 24/7"*. During an incident where a resident became upset, staff reminded her gently not to raise her voice in front of her child. The centre has a restraint policy with guidelines for de-escalation. The policy states, *"St Michaels will ensure that staff have access to regular training on restraint"*. The last training of this type took place in October 2005, and is to be repeated later this year.

Standard 9 Residents have a key to their rooms, and staff hold a master key for use in an emergency. Doors are left open when residents are in their rooms, and they are encouraged to spend time during the day in the communal areas. Part of the assessment process involves ensuring that rooms are kept tidy and hygienic, with no obvious hazards for young children, and staff do undertake room checks randomly for this purpose. These are undertaken whilst the resident is present, and are as non-intrusive as possible. When an item was needed for a young child, a member of staff was heard to say, *"Do you mind if I go in your room?"* The telephone is sited on the first floor landing, which is not ideal for privacy and confidentiality, but most of the young women have mobile phones for their private use.

Standard 10 The centre has a leaflet for residents entitled, "How to complain". It makes it clear that residents have a right to complain about unfair treatment, and crucially adds, *"No one will get at you for making a complaint. It will not affect your stay at the centre"*. There was only one complaint recorded in the book, and this had been well recorded, with written accounts from the complainant and the member of staff about whom the complaint was made. The manager had detailed the action taken, a three-way meeting with the manager, and had indicated in the record that the complainant was satisfied with the result. The same resident had complained about her bed making her itch, and had been offered a mattress swap. However this was not recorded as a complaint. In the last provider's report of 31/10/06, it states, *"Complaints, however informal should be recorded here as well as on the daily recording"*. This was discussed with the manager who agreed that this would be done in future. Minor grievances can escalate, and can be brought back at a later stage. Also, to record minor grumbles, and show that the centre is taking them seriously can be empowering for young people, and can demonstrate that staff are listening to what they say. The manager reminded staff in the team meeting to log all minor complaints. It is recommended that all complaints be logged (**recommendation 1**).

Standard 11 The centre's admissions log records whether children admitted with their mothers to the centre are on a court order, or on the child protection register and under what category. This information informs the placement plan. Staff attend the in-house course in child protection and also can access courses run through the area child protection committee in Lambeth. One

member of staff recently attended a course entitled, "*Race and culture in safeguarding children*". There is a whistle blowing policy for staff to report bad practice.

Standard 12 Residents at the centre are young women between the ages of 17 and 22. Some have been in abusive relationships, and others may have suffered abuse themselves as children. The centre aims to support them to become independent so that they are able to parent their own children successfully. Throughout the day there were observed interactions between residents and staff, where staff spoke respectfully to residents, and engaged with the children appropriately, demonstrating good parenting as a role model, whilst empowering the parents. Questionnaires prepared for key work sessions showed the desire of staff to understand the young people, and to engage with them in a positive and non-punitive way.

Standard 13 Following an incident at the centre on the day of the inspection, a decision was made to call a meeting with the social worker to decide whether to alter the placement plan.

Standard 15 The recruitment records for the manager, the deputy manager, two newer staff members and one sessional worker were seen at the company's head office. All had application form with full employment histories documented, a photograph and evidence of identity. Evidence of qualifications was on files, and two written references were seen. Contracts were on file but not all were signed. The Director said that new contracts were issued some time last year, and a staff member is responsible for recalling them to place on staff files. Copies of the criminal records bureau checks for the manager at an enhanced level and her partner at a standard level were not on file, and a requirement is made on this matter (**requirement 1**).

Standard 22 The inspection took place on a cool winter day. The building was warm, and the rooms well lit. Tap water from the bath was very hot and this is addressed under standard 20. A health and safety check undertaken on 27th December shows jobs needing doing, such as replaced light bulbs, were actually completed the same day. A push bar is now fitted on the playroom door leading out into the garden, which would make evacuation easier in case of emergency. Fire alarm points are tested weekly, and a fire drill took place on 12th December. The names of all the residents and staff who participated were recorded as was time taken to evacuate the building. Comments on the drill stated, "*All residents were spoken to about how to act in such a situation in future*".

Making a Positive Contribution

The intended outcomes for these standards are:

- Parents and children are admitted to and leave the centre in a planned and sensitive manner.(NMS 2)
- Children and their parents have their needs assessed and written plans outline how the assessment will be undertaken.(NMS 3)
- Parents and children using the centre feel well-informed and party to decisions made.(NMS 6)
- Parents and children enjoy sound relationships with staff based on honesty and mutual respect(NMS 7)

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

2, 3, 6 and 7

Residents are well informed about the process of the assessment, and written plans outline the tasks to be undertaken. Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

Standard 2 Moving in arrangements are planned with the resident, social worker and centre staff before the placement commences. Residents and social workers are told clearly what they must bring. The centre provides furniture and white goods, but residents must have their own baby equipment, and must cater for themselves whilst in residence. A straightforward leaflet called, *"Moving in to 52 Palace Road,"* outlines the timetable for the move, and the key tasks to be performed in the first few days. The leaflet has pictures and is laid out in an accessible way, with the acknowledgement that, *"your move into Place Road may be a hectic and overwhelming experience"*. Residents are required to read the meters each week to calculate what they owe for gas and electricity. This enables staff to form a good view of their abilities to budget, feed themselves appropriately, and take responsibility for payment of utilities. Where possible residents visit the centre informally before they move in. In some cases the parent moves into the centre for some weeks before being joined by their child. This enables staff to carry out a viability assessment and avoids disruption to the child's routine, if the placement is unlikely to succeed.

Standard 3 Each resident has a placement plan that details the tasks that have to be accomplished and the methods whereby information will be

gathered and assessed. Residents have a copy of this, and also receive copies of their daily logs. Assessments are conducted in keeping with the Department of Health's *'Framework for the Assessment of Children in Need and their Families'*. Each resident has a key worker whose task it is to monitor the placement plan and to amend where necessary to reflect changes in the resident's performance. Key workers make time to provide individual support and guidance to residents.

Standard 6 All staff input throughout the day onto the residents' daily log, and the young women receive a copy of what is written each day. They can make observations on what has been written, or challenge it. The Statement of Purpose says, *"Parents are invited to make comments about the service they receive and the progress of their assessment by use of Placement Review Feedback Forms"*. It also states that comments made by the residents become part of their file, so that their views are taken into account. Residents are encouraged to attend house meetings each Friday, when issues relating to the operation of the centre can be raised. Key workers design a proforma to give to the residents prior to a key working sessions. These contain questions such as, *'What has been the highlight of your week?'* *'What has gone well for you?'*

Standard 7 Opportunities are found throughout the day for staff to engage with residents, and residents are encouraged to take responsibility for their children at all times. The manager said that they had received a referral for a non-English speaking resident. They agreed to find an interpreter if social services would pay for the necessary 24 hour cover. Given the need for close and regular communication, this was a reasonable request, and shows that residents will not be admitted to the centre inappropriately.

Achieving Economic Wellbeing

The intended outcomes for these standards are:

- Parents and children live in pleasant, well designed and maintained surroundings providing sufficient space and adequate facilities to meet their needs.(NMS 19)
- Parents and children enjoy homely accommodation, decorated, furnished and maintained to a high standard, providing adequate facilities for their use.(NMS 20)
- Shared spaces complement and supplement residents' private rooms.(NMS 21)

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

19, 20 and 21

St Michael's provides spacious and homely accommodation for residents whilst they are being assessed. Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

Standard 19 The centre is a large Victorian house close to shops, bus routes and a train station. It is indistinguishable from its neighbours, and has parking to the front and a large, level garden mainly laid to grass at the rear. The rooms are spacious, well decorated and furnished with robust furniture, including high chairs in the communal kitchen, a small table and chairs for toddlers and a playpen, a range of videos, books and play materials in the play room. The manager lives in a flat within the building, but has a separate entrance to the side of the building. There is no CCTV, but residents do not hold a front door key, and staff members only are permitted to admit visitors to the building. The first floor shower room is awaiting refurbishment after a leak, and staff say that the owners of the property, London and Quadrant are slow to do repairs. The lack of additional showering facilities is one reason why the centre has only three residents at present. It is recommended that this room be returned to use as soon as possible (**recommendation 2**).

Standard 20 Each resident has her own bedroom containing a bed, chest of drawers, wardrobe, and table and chairs. Residents are required to bring with them items such as bed linen, kitchen utensils, crockery, cutlery and a bed or cot for their child. There is a small kitchen attached to each bed-sit with a cooker, fridge, lockable medicine cabinet, and child safety gates. There is a

bathroom and toilet on each floor, and separate toilet facilities for staff in the sleeping in room. There was no thermometer available to test the temperature of the water from the bath taps, but it was scalding hot. A health and safety warning notice on the wall reminds residents to put cold water into the bath before hot, but a child could put their hand under the running tap with dire consequences. The health visitor endorses this view. A requirement made at the last inspection to install thermostatic valves to each of the bath taps has not yet been actioned, and this is a further requirement (**requirement 2**). It is also recommended that a notice be placed in both bathrooms, warning that the water is very hot (**recommendation 3**).

Standard 21 There are two large rooms on the ground floor which are communal space. One is a kitchen, with a large freezer that residents can use, the other is a lounge playroom, where food is not allowed, and they both have a range of soft seating for parents and staff to relax with the children. There is a small laundry room at the back of the house where residents can do their washing. There is an industrial dryer alongside the washing machine where residents may dry their washing, or they may choose to take washing upstairs to dry in their rooms. There is a maintenance programme for equipment. A gas safety check was carried out satisfactorily on 13/7/06 and portable appliance testing was done in September. A rubber bath mat was taken to the upstairs bathroom when it was pointed out that the mat was missing, and that the resident on the top floor planned to bath her baby in the bath that day.

Management

The intended outcomes for these standards are:

- Parents and children who use the centre know what they can expect, how they will be treated, how the centre operates, and have had this information in written form prior to admission.(NMS 1)
- Parents' progress is recorded to reflect their ability to care for the children in a safe manner, promoting their welfare.(NMS 5)
- Parents and children receive the care and services they need from competent staff.(NMS 14)
- Staff are sufficient in number, experience and qualification to understand the needs of parents and children and who are able to respond appropriately when required.(NMS 16)
- Parents and children receive a service from staff who are themselves supported and guided in safeguarding and promoting the children's welfare.(NMS 17)
- Staff are trained and enabled to carry out the role to which they are appointed.(NMS 18)
- Parents and children enjoy the stability of an efficiently run service and purchasers have confidence that they are getting value for money.(NMS 23)
- The service's work with parents and children is continually adapted in the light of information about how it is operating.(NMS 24)
- There are adequate records of both the staff and families using the service.(NMS 25)

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

1, 14, 16, 17 and 24

St Michael's is a well-run service. Staff are skilled and competent to fulfil their roles. Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

Standard 1 The centre has a written Statement of Purpose, which sets out what the centre provides and the way in which the service is run. This was immediately available for perusal, and had recently been updated to include the new staff members. In addition there is a Residents' handbook and this is a comprehensive but easy to read document answering the sort of questions young people will have when they come into the centre.

Standard 14 The centre is staffed by a competent and highly qualified team that includes social workers and psychology graduates. Other staff hold qualifications in therapeutic childcare, counselling and behaviour management. This mix of skills is likely to be productive in terms of the cross-fertilisation of ideas, and in addition all the workers have extensive experience in working with children and families in a residential setting or in the community. The skills of the staff are clearly in evidence in their rapport with the residents. One of the residents said, *"Most of them are really lovely"*. The manager has been in post for over a year but is not yet registered with the commission. The delay was due to the fact that the manager did not take up residence on the premises until the middle of last year, and needed to obtain proof of address before registering. However, the Provider is reminded that the manager is committing an offence under section 11(1) of the Care Standards Act 2000 by not being registered with the commission, and her registration is a further requirement (**requirement 2**). However the manager has introduced some new systems to the centre, and staff have responded to her management style, which has let them know that she is prepared to do anything she asks someone else to do. One professional said that the manager had introduced, *"minor changes that make a difference"*, and made the centre, *"more of a home"*.

Standard 16 The staff team comprises a manager, who lives on site in a self-contained flat, a deputy manager and five residential family assessment workers. There are two workers on duty each day in addition to a manager, and any shortfalls are made up by the use of sessional workers recruited and employed by St Michael's in the same way as permanent staff. The manager believes that the use of known workers is important for continuity. No agency workers are used. There is one waking night staff on duty for the first two weeks of any placement.

Standard 17 Staff receive regular fortnightly supervision. Recently, because there was no deputy until recently, the supervision was monthly because the manager was supervising all the staff. However staff are able to have ad hoc supervision, and case discussions in handovers provide opportunities to highlight areas of difficulty or to receive guidance. Staff meetings are held every Wednesday, and all staff attend these. The meetings have an agenda with items submitted from staff and is fully minuted, with action points and the person designated to carry out the action. Staff were seen to be supportive to one another when an incident was taking place, and responded quickly to the need to take a child out of a difficult situation. The team receives three weekly consultancy by an independent psychologist who helps them look at new ways of working with the residents.

Standard 24 The manager has oversight of all the reports prepared at the centre, and countersigns them before they are sent out. Provider reports are

prepared monthly and recommendations made in these reports are taken to staff meetings, and picked up in the manager's own supervision sessions.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Residential Family Centres have been met and uses the following scale.

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

BEING HEALTHY	
<i>Standard No</i>	<i>Score</i>
4	3

STAYING SAFE	
<i>Standard No</i>	<i>Score</i>
8	3
9	3
10	3
11	3
12	3
13	3
15	2
22	3

ACHIEVING ECONOMIC WELLBEING	
<i>Standard No</i>	<i>Score</i>
19	3
20	2
21	3

ENJOYING & ACHIEVING	
<i>Standard No</i>	<i>Score</i>
No NMS are mapped to this outcome	

MANAGEMENT	
<i>Standard No</i>	<i>Score</i>
1	4
5	X
14	3
16	3
17	3
18	X
23	X
24	3
25	X

MAKING A POSITIVE CONTRIBUTION	
<i>Standard No</i>	<i>Score</i>
2	3
3	3
6	3
7	3

Yes

Are there any outstanding requirements from the last inspection?

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Residential Family Centres Regulations 2002 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action
1.	RFC15	16(3)(d)	The Registered Person must ensure that criminal records bureau checks are obtained and are on file for all persons living or working on the premises of the family centre.	23/02/07
2.	RFC20	21(2g) 10(1a) 11(4a)	The Registered Person must ensure that all hot water outlets in bathrooms and wash hand basins are fitted with safety devices to prevent the risk of scalding. Restated requirement. Previous timescales of 31/01/2005 and 30/09/05 not met.	23/02/07
3.	RFC14	Care Standards Act Section 11(1)	The Registered Person must ensure that the manager is registered with the commission without further delay.	23/02/07

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	Good Practice Recommendations
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	Standard	
1.	RFC10	It is recommended that all complaints, no matter how small are logged in the complaints book, to show the process whereby complaints are dealt with and that the centre staff are responsive to residents' needs.
2.	RFC19	It is recommended that the shower room on the first floor be repaired and refurbished without further delay.
3.	RFC20	It is recommended that a notice be placed in both bathrooms warning that the water is very hot.

Commission for Social Care Inspection

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