



*Making Social Care
Better for People*

inspection report

RESIDENTIAL FAMILY CENTRE

St Michael's Fellowship 52 Palace Road

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

Lead Inspector
Mary
Magee

Announced
20/05/2005

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 Michael's 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	
Name of registered provider(s)/company (if applicable)	St Michael's Fellowship
Name of registered manager (if applicable)	Mrs Patricia Eleanor Pryce
Type of registration	RFC Residential Family Centre
No. of places registered (if applicable)	6
Category(ies) of registration, with number of places	RFC Residential Family Centre

SERVICE INFORMATION

Conditions of registration:

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 14/11/2004

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 are a large spacious detached house with six individual bedsits, 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.

This annual announced inspection was carried out over eight hours on 20 May 2005. Each part of the premises was viewed. The inspector met with one parent and her child, three members of staff as well as the manager. Comment cards were received from parents that have lived at the home in the past six months. Comments were also received from two placing authorities.

What the service does well:

The centre is well run and has a committed staff team. The children are safe and secure while meanwhile having the opportunity to bond with their parents during the placement period. Staff are competent and skilled in monitoring, assessing and dealing with anticipated behaviours as well as developing good relationships with young teenage mothers. Overall, staff give a fair and professional assessment of young teenage mothers' ability to look after their children safely. The young mothers are made fully aware of the reason for the placement and have a good understanding of what skills they need to develop in order to care for their child safely. During the assessment process the young women are given education guidance and support to enable them to develop the necessary parenting skills that they currently lack. Staff involve the service users fully in the assessment process. This enables the young people to develop trust and take advice from professionals such as the health visitor and the doctor. Staff are skilled and experienced providing a sensitive and caring service that promotes self-esteem and self worth.

What has improved since the last inspection?

The centre continues to provide a high quality service. It has developed an effective evaluation system to determine how successful it is in meeting the needs of young mothers and their children. "An excellent resource centre", was one of the comments received from guardians. The interior of the

premises has been redecorated. Many of the bedrooms have been painted. A small number of rooms including bathrooms were awaiting completion. Staff have continued to receive excellent training opportunities to prepare them for the role.

What they could do better:

A more prompt response to repairs is needed, especially those that could be harmful to children such as hot water supplies. The centre relies on the response to repairs from the London Quadrant Housing Association which is the Landlord. Some areas identified in the health and safety audit conducted by the organisation have not been responded to adequately.

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 standard(s) 4

The centre provides a safe environment for young mothers and their children while continuously assessing the parenting skills. Information, support and access to healthcare and leisure facilities is provided that enables the development of good parenting skills, the continuation of education, and pursuit of leisure interests.

EVIDENCE:

The centre has established strong links with local health care services and the GP. Both families at the centre were registered with this GP practice for the duration of their stay at the centre. The health visitor is a member of the house committee demonstrating a commitment by the centre of working closely together with all professionals in achieving best results for the young parents and their children.

Each family is allocated a member of staff known as a key worker. The key worker works closely on supporting and guiding the mother as well as monitoring parenting skills. Individual sessions are held with parents where they sit and discuss progress and record all findings on a daily log. All parents are encouraged to read any information written about them at the home. Reports are given to parents to write their own comments before they are given to anyone else. This includes observations of the development of parenting skills with particular emphasis on nutrition and healthy living. If concerns are raised regarding welfare of the child, the parent is told that it is of concern and the health visitor is consulted.

The inspector spoke to the health visitor who was visiting the home at the time of inspection. During this time, she was discussing the progress of one young mother and her child. Staff at the centre were concerned about the health needs of one child and discussed this with the health visitor. One young mother was finding difficulty in returning at acceptable times resulting in concern about the child's feeding times. This was monitored continuously by staff and prompt action had been taken to discuss the action necessary to

safeguard the child. Parents are expected to attend the health centre for check ups every week during their stay at the centre. Information on services in the community such as leisure facilities and further education classes with contact telephone numbers are included in the service user's guide. When a parent is attending an appointment such as a court hearing, a registered childminder from outside the centre takes care of the child. A worker from Sure Start Plus attends the centre every Friday for meetings with the young people. Young people have the opportunity to continue their education during their stay at the centre. The manager spoke of one young mother and her five-year-old child that had recently lived at the centre. She attended a pupil referral unit throughout this time while her child was cared for by a foster carer who previously had had full care of the child. Two mothers were residing at the centre at inspection time, one had a child of twelve months, and the other child was four months old. One young mother spoken to said that the centre had provided her with all the help and support she required and that staff were sensitive and kind.

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 standard(s) 8 9 10 11 12 13 15 22

There is a professional and highly skilled team trained and competent in assessment skills who can make appropriate interventions in a manner that is supportive but not undermining. The premises are spacious and comfortable but there are outstanding issues from the last health and safety audit that need addressing.

EVIDENCE:

All service users are issued with a written agreement/contract before moving into the centre. The agreement for one family was viewed. This three-way

contract/agreement was drawn up between the family, social services and the centre before admission. The manager explained how flexibility is incorporated into contracts; the contracts are negotiated to ensure that the needs of all the parties involved are clear and agreed upon. The agreement detailed codes of behaviour expected of service users that include respect for other users and staff. The agreement also gives details of the assessment process used for the stay at the centre. The assessment process used included a level of guidance and support that involved interventionist and non-interventionist observations, key working sessions, parenting and life skills development as well as play therapy. The service users' guide provides further information on the centre and codes of behaviour expected of people living there. While the privacy of parents and their children are respected the centre plays a key role in ensuring that parenting skills are monitored and assessed on an ongoing basis with the focus on the protection of the child paramount. Visitors to the centre are welcomed but due to personal histories some are required to be vetted and approved by the social worker. A signing in book with signatures for all that visit the centre was observed. Agreements are also made regarding the parent's whereabouts when they are not at the centre. On inspection day staff were monitoring the whereabouts of one young mother and her child as she was late in returning. Contact had been made on the mobile phone by staff reminding her to return for the child's mealtime.

To ensure that children are safe and that parents develop good skills the agreements also state that parents use the communal facilities in the daytime period. When service users tend to spend more time in their rooms staff gently prompt them to use the communal areas. There was direct observation of this practice during the inspection. Service users are also encouraged to leave bedroom doors open so that staff can ensure the welfare of the children. In the first two weeks of admission for a new family, a waking night staff is on duty.

Record keeping is good with all records securely stored. Families are made aware by the service users' guide and by agreement that the centre has an open recording policy and that any information recorded by staff is given to them before it is shared with other professionals. Records viewed included incidents and complaints. The centre has clear procedures in place for responding to allegations or suspicions of abuse, either by staff, or by parents, or by other children in the centre.

The centre had a clear policy on 'Child Protection' and 'Arrangements for protecting children accommodated'. The incident records were viewed, they also linked with the daily assessments compiled and recorded for each family. There was an incident recorded of an occasion when a mother was observed to roughly handle the child. This was also recorded in the daily assessment record and used to determine if the child could be looked after safely with the mother putting the child's needs first.

For one young mother the placement had broken down recently, the inspector saw copies of the correspondence with the placement authority that necessitated removal of the child. Staff had concerns for the welfare of one child during the inspection, a young mother was not bonding very well with her child and parenting progress was poor. While the inspector was present the staff telephoned the social worker to express the concerns, the social worker responded and arranged to attend the centre to determine if the child needed to be removed to a safe place.

A young mother spoken to said that staff respected her privacy and dignity but on occasions she felt the centre too restrictive, as she had to return to look after her child. She said that she had difficulty in taking responsibility for a baby and was not able to lead a full life as other teenagers do. Staff were supporting her with this in a very sensitive manner and had consulted with the social worker.

Records for staffing personnel are held at head office. These were made available at the centre for inspection. From viewing a number of these indications were that staff were vetted thoroughly before appointment. Applications were made to the CRB for the family of the manager. They reside in an apartment adjoining the centre.

The premises are well maintained and pleasantly decorated. The house is secure, the front door is doubly locked at night and an intruder alarm is also activated. Records indicated that the fire alarm is tested weekly and that fire drills were carried out regularly. Records of essential maintenance indicated that equipment including smoke detectors and emergency lights were serviced regularly.

Annual health and safety audits are undertaken. A number of issues were raised at the annual health and safety audit completed in April 2005. Some of these had been attended to but there were a number outstanding that require attention. The hot water supply has not been fitted with control valves although this was requested at the previous inspection. The manager said that when parents were bathing the children they were supervised and taught the importance of putting cold water in first. It is repeated as requirement that hot water regulators are fitted to all hot water supplies.

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 standard(s) 2 3 6 &7

Children and their parents move into and leave the centre in a planned and sensitive manner. Risk assessments and care plans are developed and regularly reviewed for each family. They clearly outline identified areas of risk or concern and how these are addressed at the centre. In the event of a placement breaking down prematurely all relevant parties are fully involved in discussions and decision-making. The protection of child is paramount to the service at the centre.

EVIDENCE:

Moving in and leaving arrangements are planned with parents and purchasers in a caring and sensitive manner. However, there were occasions when placements had broken down and placing authorities were fully involved in responding and taking action to ensure that the safety of the children was paramount.

The centre has a referral system whereby young parents and their children are referred by a social worker. Additional information is also requested regarding the background and personal history of the mother as well as records of the risk assessment. A team selection meeting is then held to which all the professionals involved are invited. One mother told the inspector that she was kept informed fully on the placement agreement and the plans for her continued assessments at the centre. She said that she had found staff to be, "considerate and understanding". When she moved to the centre she said that she was introduced to those already living there and, "made feel included".

Placement plans were viewed for two families at the centre. All families are allocated a key worker for the duration of their stay at the centre. The inspector viewed written records held of key working sessions, parenting sessions and daily logs. Indications were that parents were fully involved in the completion of daily logs and asked for comments on the assessments written by staff. Minutes of house meetings were also available, these included feedback from parents on issues they had raised.

The trustees and responsible individual for the organisation meet with parents at least every month. Comments from some of these discussions are included in monthly Regulation 30 reports.

The manager spoke of the concern and the sensitivity shown by staff when a young mother is assessed and indications are that she is not enjoying or developing sound relationships with her child. Staff are experienced and skilled in the assessment process ensuring that balanced judgements are made, risks to the child are continually assessed with consideration given to the risk if the child is not removed when there are strong indicators of poor parental development.

Weekly team meetings are held. The records indicated that issues arising and of concern regarding parenting skills were discussed in the group setting. Examples of the vigilance by staff in taking prompt action to respond to concerns were observed on the day. The placement social worker was informed about the poor development of parenting skills by one young mother and her inability to make a substantial change to her lifestyle to promote the safety and welfare of her child. The organisation employs a resettlement social worker who is introduced to parents before they leave the centre. She supports their transition to independent living for a period of six months.

The guardian of one young mother with a successful placement at the centre commented positively on the opportunity given to the young mothers using the centre. She had found it to be a positive and enabling experience for the young woman. A placement social worker commented on the self esteem developed by several young mothers that she had placed there. She reported that she had found staff very experienced and that they anticipated problems in advance.

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 standard(s) 19 20 & 21

Parents and their children enjoy pleasant and comfortable accommodation at a centre that provides adequately for them during the assessment period. Improvements are required to the arrangements for health and safety and fire evacuation procedures.

EVIDENCE:

The centre is in a large detached house located in a residential road close to public transport and leisure facilities. It offers six spacious self-contained bedsits with kitchens. The landlords are London Quadrant Housing Association. There were issues regarding cracks externally/subsidence and engineers had been consulted. The landlords, who are also responsible for the repairs, have been dealing with this. Communal areas provided include, a lounge/family room, playroom and bathrooms. The communal facilities enable people to develop friendships and learn from others. There are big comfortable sofas provided that enable people to relax and socialise.

The playroom and the garden have a variety of toys. Safety gates were in use throughout the building. There have been a number of improvements made since the last inspection. The interior was bright and pleasant. Redecorating has taken place to the bedsits requiring it as well as to the communal areas. Work was still in progress on vacant bedrooms.

The bedsits are all pleasantly furnished and comfortably meet individual needs. Cookers and fridges are provided to enable the young mothers to develop life skills.

The premises are well maintained with records available to indicate that all essential equipment was regularly maintained. Health and safety audits are undertaken annually, the last one was April 2005. A number of areas were identified as requiring attention in the April report. Not all of these have been addressed. Hot water outlets remain a hazard, as there are no temperature control devices in place.

The arrangements for fire procedures were adequate, records of weekly fire alarm testing and fire drills were available. Not all the fire drills were recorded monthly. A fire exit bar had been recommended for the rear exit door following a visit by LEFDA the manager reported. This she said was awaiting action by the landlord.

One area requiring attention urgently is the provision of a push bar to the back door for use in the event of a fire. Other matters requiring repair or improvement include one pane of glass in the front door. It is cracked and needs to be replaced. The sealant in one of the bathrooms on the second floor was discoloured and starting to come away from the tiles. One of the bathroom windows has a broken catch.

One bedsit not in use was undergoing refurbishment. Portable electric appliance records indicated that they are tested annually. In the interim period people that move to the home do not have their portable appliances tested. An environmental health inspection was identified at the last CSCI inspection. This has been responded to. A recommendation was made that remedial work be done to fire doors. Work has been completed on fire doors on the ground floor. Other works required are part of an overall plan for improvement.

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 standard(s) 1 5 14 16 17 18 23 24 25

Parents and their children are treated sensitively and receive the necessary support and guidance in a way that is not undermining. Opportunities are given to enable the parents to develop good parenting as well as life skills. They are consulted with and asked to contribute throughout their assessment process. The service is well run by an effective and professional staff team.

EVIDENCE:

Before admission parents are provided with full information on the content of the twelve week planned assessment. As well as a service users' guide a working agreement/contract is drawn up and provided. It outlines the aim of

the placement time at the centre. The agreement details the reasons for the placement at the centre based on social workers reports regarding parenting skills and the concern for the protection of the child. The purpose of the placement at the assessment centre is to enable staff to observe how a mother cares for her child safely and protects her from other people.

Daily log sheets are written which focus on the positives and concerns. The logs indicated that parents were consulted and able to read and contribute to the daily records. Signatures were present on daily logs to acknowledge that parents had read staff comments. There were additional written records on files providing evidence of weekly planners, of parental sessions and session reviews.

Records of previously placed young people included documentation of six weekly and twelve week reviews completed for a young mother. A weekly summary sheet was also viewed for a current young mother. It had excellent detail of progress. It included a one-week summary of child health issues and appointments including weight, height, parent health issues and summaries from play development sessions. There were also summaries from key working sessions and comments on participation with the placement. One section indicated that some changes were necessary to care plans and the following weeks planner was adapted to reflect changing circumstances.

On examination of staff files, it was indicated that the selection programme was rigorous and that staff were thoroughly vetted before appointment. A copy of the induction-training programme was viewed. This included first aid training and recording and report writing as well as child protection. Staff were professional and competent. Comments received from placement authorities confirmed this. Staff are skilled and experienced in working with a variety of identified needs.

An annual appraisal system is in operation whereby training needs are identified in relation to the service development. The staff team come from a multicultural background and offer a wide range of experiences and skills. Their qualifications range from Diplomas in Social Work and Psychotherapy, Diplomas in Therapeutic Childcare, Psychology Degrees as well as Counselling skills and other relevant studies. All staff have recently received a twelve day training in Child protection. Other training records viewed confirmed that drug awareness, attachment and child development were also provided to staff.

As the requirement is that 80% of staff are qualified to NVQ Level 3 or equivalent by 2005 the centre must take steps to equate the qualifications held by staff against this standard and, if necessary, address any shortfall.

From discussions with the manager and from viewing records of training provided it was indicated that access to training in child development and child

protection had been facilitated. Current First aid certificates acquired by staff were displayed on the notice board.

Staff spoken to said that they had regular supervision every two weeks. There was a concern about the supervision provided for two members of staff. For personal reasons supervision had been provided by the service director. The manager said that this had affected somewhat on the dynamics of the team.

The manager spoke of her plans to leave her employment in the near future and therefore the supervision issue would be resolved. The CSCI have now received formal notification of the registered manager's resignation as well as the temporary management arrangement for the centre. The deputy director of the organisation is managing the centre until a new manager is appointed. Recruitment for this post had commenced.

Comments received from the social workers placing families at the home were very positive and did not reflect any difficulty with communication between staff. This was also evident in observations made of the interaction and from the discussions held with professionals at the centre. Feedback from the guardians and placement authorities as well as from mothers that had completed placements there was very positive on the efficiency and professionalism displayed by the staff team. Good communication was one of the many positive aspects commented on by guardians and placement social workers and the health visitor.

The centre receives regular announced and unannounced visits by the responsible person for the organisation. Daily log and centre records are reviewed and copies of reports made of these visits are forwarded to CSCI. Staffing levels at inspection time were appropriate. A business and financial plan was available demonstrating the service was effectively managed and financially sound.

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	3
22	2

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

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	3
5	3
14	3
16	3
17	3
18	3
23	3
24	3
25	3

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.	20 22	21 (2) (g) 10 (1) (a) 11 (4) (a)	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. Previous timescales of 31/01/2005 not met	30 th Sept 2005
2.	20 21 22	21 22	The registered person must ensure that areas identified at annual health and safety audit in April 2005 are responded to and addressed.	30 th Sept 2005
3.	21 22	21 22	The registered person must ensure that the back door has a push bar device fitted for emergency exit in the event of a fire. This had been identified by the LFEPA at an earlier visit.	31st Aug 2005
4.	22	10 (1) a 21 (2) b	The registered person must ensure that the cracked glass in the front door is replaced	31 st Aug 2005
5.	21	21 (2)(g). 10 (1) a	The registered person must ensure that bathrooms are attended to, window to be repaired in 2 nd floor bathroom, old grouting to be removed and replaced	30 July 2005
6.	19	11 (3)	The registered person must ensure that a plan is drawn up for upgrading fire precautions with intumescent strips added to	31 st Dec 2005

			fire doors.	
7.	17.	17 (5) a	The registered person must take steps to equate the qualifications held by staff against the NVQ Level 3 qualifications required by 2005 and, if necessary, address any shortfall.	30 December 2005

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.	22	The registered person should ensure that the portable appliances of all those admitted to the centre are tested
2.		

Commission for Social Care Inspection

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