SITE survey. APP

SITE SURVEY REPORT

Care Home Audit

Prepared for	Elmbrook Care Ltd
Date	23 Sep 2026
Site	Larkfield House, Harrogate
Prepared by	R. Haldane

FORM

Care Home Audit

1. Details

Project	Larkfield House, Harrogate: care home audit (completed example)
Provider	Elmbrook Care Ltd
Home or service	Larkfield House
Address	22 Moor Lane, Harrogate HG2 7QD
Date of audit	23 Sep 2026
Auditor	R. Haldane, quality lead
Areas and shifts covered	Ground and first floor, day shift 08:00 to 14:00, lunch observed
Residents spoken to	4
Staff spoken to	6
Care plans and records sampled (room or reference only)	Care plans: rooms 3, 9, 12, 14 and 20. Daily notes and fluid charts: rooms 9 and 14. Accident and incident log for August and September.

CQC's five key questions are whether a service is safe, effective, caring, responsive to people's needs and well-led. This audit is a manager's own check under those headings. It is not a CQC assessment, and it does not list every regulation. In Scotland, Wales and Northern Ireland care homes have their own regulators. In England, regulation 17 (good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 requires providers to have systems to assess, monitor and improve the quality and safety of the service, and to keep accurate records; a provider audit like this is one way to show that.

2. Safe

Enough staff are on duty for the needs of the people living here today	Yes
Staff can say what abuse is and how to report a concern	Yes
Risk assessments, such as falls, skin and choking, are up to date in the care plans sampled	Partly
Medicines are stored and recorded correctly on the round observed	Yes
The building is clean, safe and free of hazards, with call bells in reach	Partly
Accidents and incidents are recorded, reviewed and acted on	Yes

Notes	Rota matched staff on duty. Falls risk assessment for room 9 overdue for review. Call bell out of reach in room 14, put right on the day.
Safe score (%)	83

3. Effective

Care plans sampled are current and reflect the person's needs	Partly
Consent and mental capacity are recorded where decisions are made for someone	Yes
People are offered enough to eat and drink, and weights are monitored where needed	Yes
People see the GP, nurse and other professionals when they need to	Yes
Staff training and supervision are up to date	Partly
Notes	5 care plans sampled, 2 not reviewed this month. Moving and handling refresher overdue for 3 staff, booked for October.
Effective score (%)	80

4. Caring

Staff speak to people kindly, by the name they prefer, and without rushing	Yes
Personal care is given in private, with doors and curtains closed	Yes
People are offered choices about their day, food and clothes	Yes
People look well cared for: clean clothes, hair, nails, glasses and hearing aids	Yes
Families and friends are welcomed and kept informed	Partly
What did residents and families say?	Residents said staff are kind and the food is good. One family said they are not always told when a GP visit has happened.
Caring score (%)	90

5. Responsive

There are activities today that people chose and are taking part in	Partly
Care plans record preferences, life history and what matters to the person	Yes

Complaints are recorded, answered and learnt from	Yes
End of life wishes are recorded where people want to give them	Yes
Call bells are answered promptly on the checks made	Yes
Notes	Morning quiz in the lounge well attended. Nothing on offer for people who stay in their rooms upstairs.
Responsive score (%)	90

6. Well-led

The programme of audits is up to date and actions are completed	Yes
Staff say they are listened to and know who to go to	Yes
Records are accurate, secure and up to date	Yes
Notifications to the regulator have been made when required	Yes
Feedback from residents, families and staff is collected and acted on	Partly
The latest inspection rating is displayed	Yes
Notes	Relatives' survey sent in July, results not yet shared back with families.
Well-led score (%)	92

7. Findings and actions

Score

How the score works. Each Yes scores 1, Partly scores a half and No scores 0. Not applicable is left out. The score is the share of the points available, by section and overall. Green meets your target, Amber is up to 15 points below it and Red is further below. The overall score counts every question once, so a section with more questions counts for more. These bands are this form's method for comparing audits and homes, not a regulator's rating or a clinical judgement.

Overall score (%)	87
Target for this home (%)	90
Result	Amber

Amber. The home's score is below the target. Agree an action, an owner and a date for each gap.

Overall score at the last audit (%)	81
Change since the last audit (points)	6
Lowest section score (%)	80
Lowest section	Effective
Answered No	0
Answered Partly	7
Are there findings to record?	Yes

Findings 1: Safe

Area	Safe
Risk	Medium
What did you find?	Room 14: call bell lead tucked behind the armchair, out of reach from the bed.
Action	Moved back in reach during the audit. Add call bell position to the hourly room checks.
Who	S. Barlow, deputy manager
By when	30 Sep 2026

Photos



Date completed	29 Sep 2026
Status	Done
Checked by	C. Moorcroft, manager

Findings 2: Effective

Area	Effective
Risk	Medium
What did you find?	2 of 5 care plans sampled not reviewed since August. Falls risk assessment for room 9 overdue.
Action	Review both care plans and the room 9 falls assessment with the person and their family.
Who	Named nurses, ground floor
By when	7 Oct 2026
Status	Open

Findings 3: Responsive

Area	Responsive
Risk	Low
What did you find?	No activities offered to people who prefer to stay in their rooms on the first floor.
Action	Activities coordinator to add one-to-one room visits to the weekly plan.
Who	J. Price, activities
By when	14 Oct 2026

Photos



Status	Open

Findings 4: Caring

Area	Caring
Risk	Low
What did you find?	One family said they are not always told when the GP has visited their relative.
Action	Check each care plan records who the family wants told and how. Senior on shift to call the named contact after GP visits where that is agreed.
Who	C. Moorcroft, manager
By when	14 Oct 2026
Status	Open
Findings	4
High risk	0
Medium risk	2
Low risk	2
Still open	3
High risk still open	0
Overall	Needs improvement
Summary	Score 87% against the group's 90% target (Amber), up 6 points on the June audit. Effective is the lowest section: two care plans and a falls assessment are overdue for review, and moving and handling refreshers are booked. Staff were kind and unhurried at lunch. Families want to hear sooner about GP visits.
Next audit due	16 Dec 2026
Days to the next audit	85
Auditor name	R. Haldane, quality lead
Auditor signature	
Manager name	C. Moorcroft
Date reviewed by manager	25 Sep 2026

Manager signature

