

Bupa Care Homes (ANS) Limited

Manley Court Care Home

Inspection report

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26 July 2023

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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

About the service

Manley Court Care Home is a residential care home providing personal care for up to 85 adults. At the time of the inspection 73 people were living at the service, including older people and people living with dementia.

People's experience of using this service and what we found

We found no evidence during the inspection that staffing levels were not sufficient.

People's relatives told us they were happy their family member was being kept safe and there were sufficient staff on duty.

The provider had made a range of improvements in relation to care records and quality assurance processes. Despite general improvements further improvements were needed.

Staff told us they felt adequately supported by managers.

Rating at last inspection and Update

The last rating for this service was requires improvement (published 27 February 2023).

Why we inspected

The inspection was prompted in part by information of concern we received about staffing levels. We undertook a targeted inspection to look at staffing levels, and quality assurance processes.

We found no evidence that the service did not have sufficient staff. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

We use targeted inspections to follow up on Warning Notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question. We did not look at all aspects of the previous breaches of regulations at this inspection. We will follow up on breaches of regulations when we next inspect.

You can read the report from our last inspection, by selecting the 'all reports' link for Manley Court Care Home on our website at www.cqc.org.uk.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Manley Court Care Home

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

This was a targeted inspection to check on concerns we had about staffing levels within the care home. As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by 2 inspectors.

Service and service type

Manley Court Care Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Manley Court Care Home is a care home with nursing care. CQC regulates both the premises and the care provided.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included significant incidents that occurred at the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We reviewed the previous inspection report and recent feedback from the local authority. We used all of this information to plan our inspection.

During the inspection

We reviewed a range of records related to staffing levels and within the home including rotas and shift allocation reports for the home. We also reviewed 6 people's care plans and risk assessments and quality assurance records. We also reviewed key policies and examples of learning across the service.

We spoke with 6 staff members including the registered manager, the deputy manager, 2 regional directors, 3 nurses and 1 healthcare assistant. We carried out observations in relation to infection prevention and control procedures. We also reviewed records related to the management of infection control procedures across the home.

After the inspection we sent feedback surveys to all healthcare assistants to get their feedback about the service and we received 20 responses. We also spoke with a health and social care professional who worked with the service. We provided formal feedback to the registered manager on 10 August 2023.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question, we had specific concerns about.

The purpose of this inspection was to check if the provider was ensuring there were sufficient staff on duty at all times. We will assess all of the key question at the next inspection of the service.

Staffing and recruitment

- Prior to this inspection we received information of concern that inadequate staffing levels within the home were putting people at risk. We did not find any evidence the home was being understaffed during this inspection.
- Due to the nature of the concerns we made an out-of-hours visit to make observations of the staffing levels. We also reviewed a range of records in relation to staffing. The provider had a dependency tool which set out the minimum staffing levels required depending on the needs of the people. We found staff records including rotas showed minimum levels were being met in line with the dependency tool.
- Relatives of people receiving care told us there were sufficient staff on duty to care for people safely. One person told us, "There is always a nurse on the unit and enough carers as far as I can see."
- Most staff told us they felt there were enough staff on duty to meet people's needs safely.

Assessing risk, safety monitoring and management; Using medicines safely

At the last inspection we found the provider did not have effective systems in place to identify and mitigate risks to people's health and wellbeing. This was a breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

We have not looked at all aspects of the previous breach of regulations. We will review the breach of regulation 12 at the next inspection.

- At the last inspection we found some risk management plans did not contain sufficient information to guide staff to support people safely. Although improvements had been made further improvements were required.
- One person's turning chart stated they should be repositioned every 4 hours, but the charts showed this was not always happening as planned. There was no information in the person's care records to explain why they were not being repositioned in line with their turning chart. We raised this with the registered manager and they told us the person did not need to be repositioned and the charts were not in fact required.
- The same person's file showed gaps in the administration of their prescribed topical creams and food supplement thickener which had not been identified by the provider.
- Another person's care plan indicated they were not able to manage their fluid intake independently and required staff to ensure they had sufficient fluids. Despite the level of support required there was no fluid recording chart in place to ensure they were given sufficient fluids each day. Although we found no evidence

they were not getting sufficient fluids the lack of process meant the risk of dehydration was not adequately managed. We shared our concerns with the registered manager and they have resolved the issues we found and put in place fluid recording charts for all people who are unable to manage their fluid intake independently.

- Relatives of people were satisfied their family member was being kept safe from harm. One relative told us, "I am at the home regularly and see what how [family member] is being looked after. I've got no concerns about safety."

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

- We saw the provider was facilitating visits for people living in the home in accordance with the current guidance.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question, we had specific concerns about.

The purpose of this inspection was to check if the provider was ensuring there were adequate staffing levels. We will assess all of the key question at the next inspection of the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

At the previous inspection of this service the provider continued to be in breach of regulation 17. Although we found some improvements had been made, we were not able to look at all aspects of the previous breach of regulation 17. We will follow-up on the breach of regulation 17 at the next inspection.

- There were a range of quality assurance audits and checks of the service. Although we found these to be of generally good quality they had not identified the discrepancies we found and some audits contained conflicting information.
- Not all evidence initially submitted by the provider was accurate. For example, the dependency tool that was submitted contained inaccurate information about the minimum staffing levels required. We queried this with the registered manager and they subsequently sent us an updated dependency tool with the correct information based on people's current needs.
- At the time of the last inspection, there was no registered manager in post at the service. This has now been resolved and there is now a registered manager in post.
- Staff were positive about the service and the support they received from the management team. We received comments such as, "The [registered] manager's door is always open" and "They always make sure problems are solved."