

Ranc Care Homes Limited

# Manton Heights Care Centre

## Inspection report

Woodlands, off Manton Lane  
Bedford  
Bedfordshire  
MK41 7LW

Tel: 01234267556

Date of inspection visit:  
08 November 2016

Date of publication:  
18 November 2016

## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of this service on 21 and 22 September 2015. After that inspection we received information about concerns in relation to the service. We had identified that the incidents of falls people experienced within the service had increased. Concerns had been raised about this, in conjunction with the numbers of staff deployed within communal areas of the service. As a result we undertook a focused inspection on 8 November 2016 to look into those concerns.

Manton Heights Care Centre is a purpose built care home with accommodation provided from three units over two floors. The home currently provides residential care for older people and people with dementia care needs. On the day of our visit, they were providing care and support to 71 people.

The service had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

We found that risks to people's safety had been assessed, with plans in place to mitigate these, particularly in respect of falls. Staff had taken into account the risks to which people were exposed and had worked hard to ensure areas were free from obstacles and that equipment was well maintained. People had risk assessments which identified the hazards they may face and which provided guidance to staff on how to manage any risk of harm.

Accidents and incidents were recorded and the causes of these overviewed and analysed, so that preventative action could be taken to reduce the number of occurrences.

There were appropriate numbers of staff on duty, at day and night, to ensure that people's needs were met in a safe and timely manner.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service was safe.

Risk assessments were in place in respect of falls and were up to date and reviewed when required to ensure they were reflective of people's needs in relation to their mobility.

Accidents and incidents were monitored, overviewed and analysed to determine if there were any emerging patterns and themes.

There were enough experienced and skilled staff on duty to meet the needs of the people at the service.

# Manton Heights Care Centre

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection took place on 8 November 2016 and was unannounced.

The inspection was carried out by one inspector.

We reviewed information we held about the service, including previous reports and statutory notifications sent to the Care Quality Commission (CQC) by the provider. Statutory notifications are information about important events at the service, such as safeguarding concerns, which the provider is required to send to us by law. We also spoke with the local authority and clinical commissioning group, who have commissioning and monitoring roles with the service.

During our inspection we observed how the staff interacted with people who used the service. We also looked at how people were supported with their personal care needs and moving and handling requirements.

We spoke with five people who used the service to seek their views about the care they received. We also spoke with the registered manager and four care staff.

We reviewed care plans for nine people to see if they were reflective of the care that people were receiving. We also looked at records relating to the management of accidents and incidents; audits and quality assurance checks, to monitor how the service was being managed.



## Our findings

Prior to this inspection we had received some concerns about the way in which people's mobility was managed at the service, in particular in respect of falls management. Over the past few months an emerging pattern of increasing falls had become apparent and when we reviewed our information, we found that concerns had been raised about the deployment of staff in communal areas when people had fallen.

During this inspection we reviewed the way in which staff managed falls, what action they took to mitigate further risks and the measures they took to keep people safe. One person told us that staff helped to keep them safe by ensuring they remembered about taking their walking frame with them when they attempted to mobilise. They told us, "They always make sure I have my frame with me." Another person said, "They help me to remember to put on my slippers so I don't fall." People told us they appreciated the efforts staff took to keep them safe and free from harm.

Staff and the registered manager confirmed there were risk assessments in place for each person who was deemed at risk of falls and who experienced difficulties with their mobility. One staff member told us, "We have worked hard to make sure that the risk assessments are updated, that they tell us what action to take when people fall." Another staff member said, "If someone is at risk of falls, we would observe them, monitor them to make sure they are safe but allow them some independence to walk around if they are able to." Another staff member told us, "We follow the local authority falls protocol, which means that if someone has an unwitnessed fall we should call 999. Obviously we use our common sense and talk to people, assess how they are feeling and how they fell. If we have any doubt at all, we call for help and guidance. We need to know that people are safe."

Risk assessments included assessing whether a person was at risk of falls, their moving and handling ability and whether they required specific moving and handling equipment to help them move safely. The guidelines contained within the local falls prevention protocol had been followed, which meant that available information was accessible to staff in respect of how to support and manage a person's mobility needs appropriately.

Records showed that on admission a person's level of mobility was assessed, with a checklist completed to determine if a person was at risk of falls. In conjunction with this a moving and handling risk assessment was completed, as well as a falls risk assessment which gave a risk rating for falls; low, medium or high. We found that all risk assessments had been reviewed regularly and were linked to any relevant decisions made when appropriate. Risks in respect of falls were managed in such a way as to keep people safe and to protect and

promote their independence.

Staff told us they worked hard to keep people safe and used all available equipment and guidance to support them to do so. We observed people being supported to take appropriate risks. One person was unsteady when walking, but staff supported them and encouraged them to continue so that they could remain as independent as possible.

The registered manager ensured that the premises were well maintained. We saw that there was accessible maintenance staff to check the building and equipment on a regular basis and to carry out any required works. We found that environmental risk assessments had taken place within the service; which included the checking of manual handling equipment.

Accident and incident forms were completed appropriately and overviewed to identify ways in which the risk of harm to people who lived at the service could be reduced. The registered manager told us, and records confirmed, that accidents and incidents were recorded and appropriate immediate actions taken. An analysis of the cause, time and place of accidents and incidents was undertaken to identify patterns and trends in order to reduce the risk of any further incidents. We saw any issues were discussed at staff meetings and learning from incidents took place. We confirmed the registered manager had sent appropriate notifications to the Care Quality Commission as required by registration regulations

People thought there was enough staff on duty. One person told us, "I don't always see them but I know if I need them they will be there." The registered manager told us that the staffing ratio was based upon people's dependency levels and as a result was flexible and reviewed on a regular basis to ensure it remained appropriate and safe. On the day of our inspection there was enough staff with differing skill levels to ensure people were able to get the support and care they required in a safe manner. Our observations confirmed that the number of staff on duty was sufficient to support people safely and enable them to receive the care they required, particularly within communal areas of the service. We saw the staff rotas for three weeks and found that they reflected the number of staff on duty. Records showed that recruitment for new staff was underway and that although agency staff were used to fill gaps, consistent staff were used to provide continuity for people. This meant that there was sufficient staff on duty to ensure that people's care was delivered in a safe and timely manner.