

Mr & Mrs D Sessford

Manor House

Inspection report

Manor House Residential Home
London Road
Morden
Surrey
SM4 5QT

Tel: 02086483571

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17 May 2016

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15 June 2016

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of this service on 3 and 14 December 2015 and two breaches of legal requirements were found in relation to safe care and treatment, and supporting workers. The provider had not assessed the risks to people of using bedrails, this meant there was no information or guidance for staff to make them aware of the risks posed by bedrails to ensure people were sufficiently protected from these.

Additionally, the provider did not have in place a formal programme of one to one meetings (supervision) with staff to ensure they were supported to fulfil their roles and responsibilities.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breaches described above.

We undertook a focused unannounced inspection on the 17 May 2016 to check they had followed their action plan and to confirm they now met legal requirements.

This report only covers our findings in relation to these requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Manor House on our website at www.cqc.org.uk

Manor House provides accommodation for up to 23 people who require personal care and support on a daily basis. People using the service have a wide range of healthcare needs and many are living with dementia. At the time of our inspection there were 18 people living at the home.

The service is required to have a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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. At the time of this inspection the registered manager was on extended leave and the acting manager had submitted their application to the CQC to become the registered manager of the service.

During our focused inspection we found the provider had followed their action plan. Assessments were in place to manage the risk to people from the use of bedrails. Additionally, the provider had a system in place to ensure staff received one to one sessions with their manager to consider work issues and their professional development.

Sufficient action has been taken to meet the legal requirements that were breached at the last inspection. We have changed the ratings of 'safe' and 'effective' from 'requires improvement' to 'good'. This means that the overall rating for this service has been changed to 'good'.

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 management systems were in place to protect people from the risks associated with the use of bedrails. We saw there was documentation in relation to this and staff had a good working knowledge of the risks and how to manage them.

This meant the provider was now meeting the legal requirements. We have therefore been able to change the providers' rating from 'requires improvement' to 'good'.

Is the service effective?

Good ●

The service was effective. The provider had a planned formal programme of staff supervisions to ensure staff were supported to fulfil their roles and responsibilities. This included staff having the opportunity to consider their professional development during an annual appraisal.

This meant the provider was now meeting legal requirements. We have therefore been able to change the providers' rating from 'requires improvement' to 'good'.

Manor House

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 checked 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.

This unannounced focused inspection was undertaken by an inspector on 17 May 2016. This inspection was arranged to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection in December 2015 had been made. We inspected the service against two of the five questions we ask about services: Is the service safe? Is the service effective?

Before our inspection we reviewed the information we held about the service, this included the provider's action plan, which set out the action they would take to meet legal requirements.

During our inspection we visited the home and looked at records relating to bedrails risk assessments. We also looked at information regarding staff supervision and annual appraisals. We toured the building and spoke with the acting manager and two members of staff.

Is the service safe?

Our findings

At our inspection in December 2015 we found the provider had not assessed the risks to people from the use of bedrails. Bedrails are used to reduce the risk of people falling from their beds but they may also cause injury to people such as being entrapped between the rails.

The provider had not completed risk assessments for the use of bedrails as they considered them to be the responsibility of the district nurses who supplied and fitted them. They told us the district nurses carried out the checks to see if the bedrails were fitted correctly every time they visited the home and the records relating to these checks were maintained and kept by them.

At this inspection we saw six people within the home were assessed as requiring bed rails to ensure their safety. We looked at three risk assessments and saw they had been completed appropriately. They contained information about the person's capacity to make decisions for themselves. If people were unable to make decisions, the provider worked within the remit of the Mental Capacity Act 2005 to ensure that decisions were made in their best interests. There had been discussions with people's relatives and healthcare professionals to ensure bedrails were only used when necessary.

The risk assessments also gave guidance to staff about ensuring the correct positioning of the bed and bumper pads, and how and when to monitor people so they remained safe. We talked to staff who showed they had an awareness and understanding of the processes they needed to undertake to ensure people were kept safe at all times.

The acting manager told us they had discussed general issues regarding the possible risks to people within the care home during team meetings, so they could raise awareness and understanding within the staff team. The acting manager had also completed a five day training course to become a risk assessor; this was undertaken to enhance their knowledge and understanding to improve the health and well-being of people within the home.

We consider the provider had taken sufficient measures to minimise the risks to people from the inappropriate use of bedrails, so that people were kept as safe as possible.

Is the service effective?

Our findings

At our last inspection of the service in December 2015, the provider had not ensured staff were supported by formal supervision meetings with their line managers. This meant staff were not being formally supported to maintain their skills and competencies needed to carry out their duties in order to care for people within the home.

At this inspection we saw the provider had acted in accordance with their action plan. The records we looked at and staff confirmed that supervision sessions were taking place at the level outlined by the providers' own policy, which was every three months. These supervision sessions were recorded and the acting manager told us, the meetings considered staff's roles and responsibilities.

We looked at records in relation to annual appraisals and staff members' opportunities to consider their overall professional development. We saw that out of a team of 25, eight staff members had had their annual appraisal with dates already identified for the remaining staff. The acting manager also confirmed that the deputy manager was undertaking training so they could also supervise and appraise staff.

We consider the provider had taken sufficient measures to support staff through one to one meetings and told us they felt supported and could approach the acting manager and deputy if they had any issues of concern.