

Random inspection report

Care homes for older people

Name:	Hallaton Manor
Address:	Cranoe Road Hallaton Market Harborough Leicestershire LE16 8TZ

The quality rating for this care home is:	one star adequate service
The rating was made on:	07/07/2009

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this review a 'key' inspection.

This is a report of a **random inspection** of this care home. A random inspection is a short, focussed review of the service. Details of how to get other inspection reports for this care home, including the last key inspection report, can be found on the last page of this report.

Lead inspector:	Date:								
Carole Burgess	0	2	1	2	2	0	0	9	

Information about the care home

Name of care home:	Hallaton Manor
Address:	Cranoe Road Hallaton Market Harborough Leicestershire LE16 8TZ
Telephone number:	01858555271
Fax number:	01858555332
Email address:	elainefarrall@aol.com
Provider web address:	

Name of registered provider(s):	St Bernard`s Hallaton Manor Limited
Type of registration:	care home
Number of places registered:	41

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
past or present alcohol dependence	41	0
dementia	0	41
learning disability	6	0
mental disorder, excluding learning disability or dementia	41	0
old age, not falling within any other category	0	41
physical disability	33	0

Conditions of registration:
Nobody falling within the category LD may be admitted to the home when there are 6 persons already accommodated in that category.
Nobody falling within the category PD may be admitted to the home when there are 33 persons already accommodated in that category.

The maximum number of people who can be accommodated is: 41.

The registered persons may provide the following category of service only: Care home only - Code PC to service users of the following gender: Either whose primary care needs on admission are within the following category: Old age, not falling within any other category - Code OP Physical Disability - Code PD : over the age of 40 years Alcohol dependency - Code A:over the age of 40 years Mental disability - Code MD:over the age of 40 years Learning disability - Code LD:over the age of 40 years Dementia - Code DE(E):over the age of 65 years.

Date of last inspection

0	7	0	7	2	0	0	9
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Brief description of the care home

St Bernards (now known as Hallaton Manor) is a care home providing personal care and accommodation for up to forty-one older persons, who may have additional care needs including mental disorder, dementia, past or present alcohol dependency and learning disability.

The home is a large converted country house, which is situated in beautiful countryside approximately one mile from the village of Hallaton. Accommodation is on two floors that can be accessed via stairs or a passenger lift. The rooms are single occupancy with en suite facilities. There are a variety of sitting rooms and a dining room, with a separate facility for those residents wishing to smoke.

The home has ample gardens and outside areas that includes a small but well-appointed gymnasium. There is minibus transport is available for people who live in the home.

The Statement of Purpose, Service Users Guide & last Inspection Report are available (these provide information on how the home is organised and what services they provide). The Statement of Purpose and Service Users' Guide are provided for any prospective residents and their families.

At the time of the last Key Inspection the Registered Manager said that fees were from £655 per week, depending if the resident was social service or privately funded, and was dependant on the level of care required.

There are extra charges for hairdressing, chiropody, newspapers and any additional care time if residents are accompanied to hospital.

What we found:

This is an overview of what the Inspector found during the inspection.

'We' as it appears throughout the Inspection Report refers to the 'Care Quality Commission' . The focus of the inspections undertaken by the 'Care Quality Commission' (CQC) is upon outcomes for people who use the service and their views of the service provided.

The site visit was a Random Unannounced inspection and took place over three hours to assess compliance with the requirements and recommendations made following the last Key Inspection on 7th July 2009, when the service was rated 1 Star 'adequate'.

During the last Key Inspection it was identified that the Statement of Purpose & Service Users' Guide required improvement to comply with Schedule 1, Care Homes Regulations 2001. The Statement of Purpose now provides the required information to ensure that people who live in the home, and people who may be considering moving to the home, have sufficient information about the services that are provided. Details of the new management structure will be included in due course once they have been confirmed.

During the last Key Inspection it was noted that people who move into the home had had a pre-admission assessment but that this lacked a person centered approach. The file of one person who had recently moved to the home demonstrated that assessments now contain a detailed social history profile to ensure that care staff, and other professionals, see people as individuals who require individual care and attention to meet their specific health and social care needs.

During the last Key Inspection it was noted that care plans were basic, lacked detail and in some cases had no rationale behind the care plan, and with no actions or interventions recorded e.g following GP visits/treatments etc. Information was disseminated and difficult to find to enable carers to follow through any care required. All care plans have now been reviewed, updated and re-organised to contain all of the required and relevant information within each person's individual file. Four care plans were reviewed in detail. They were well organised, detailed and contained the necessary information and risk assessments to enable carers to provide a good standard of care for the people who live in the home.

Following the last Key Inspection the home was judged poor for outcome 3 which relates to 'Daily Life and Social Activities' as there was no activities organiser or organised activities. There appeared to be no recognition of differing needs, especially for the younger people - those under 65 years. The concept of choice at meal times was not fully recognised or supported by the care staff. Although the home does not have a dedicated activities organiser they do now have a daily activities plan with activities both in the morning and afternoon with designated carers for each activity. Additional social activities have also been planned such as a Christmas Party. The local vicar visited during the morning and also provides individual spiritual support for one particular person. A small group of people are enabled to go to the local church on a regular basis. People were also taken out shopping and to the cinema. The deputy manager said that she plans to provide more CDs and DVD's to enable a greater choice during the winter months.

Three people spoken with said that they had a choice at meal times and had no complaints about the food. One person said he really enjoyed his meals and patted his stomach to prove the point.

During the last Key Inspection it was noted that staff files were poorly organised making it difficult to find information to verify that recruitment procedures had been followed. Records and evidence of staff training were poorly maintained making it difficult for the service to demonstrate that adequate training had been provided. Staff files have improved but remain a 'work in progress'. Three staff files were viewed. The required recruitment information was now available for staff with separate files for Criminal Record Bureau (CRB) checks, passports and work-permit information. One file contained only one reference with the second reference archived. All recruitment information should be retained together in the same file. All three files viewed contained staff training certificates and there was a copy of induction training for newer members of staff. A training matrix was available in the office to demonstrate that staff were receiving the required mandatory training.

The Registered Provider was advised to ensure that all staff received appropriate training in the use of physical intervention and restraint to ensure that they have the appropriate skills to safely manage people with challenging behaviors.

During the last Key Inspection it was noted that general management was rather ad hoc in nature and did not provide adequate support and leadership within the home. There was little or no quality assurance to ensure people were satisfied with the service provided. There was also poor communication between the Registered Manager, Care Manager and administrative staff. The Registered Manager has since left.

The Registered Provider is currently managing the home and is in the process of recruiting a Group Care Manager (an experienced nurse) who will oversee this and another home whilst providing support to the deputy managers as they prepare to apply for registration with CQC.

Management of the home now appears to be more organised, structured and stable. Staff were receiving regular supervision and support. Training was organised and kept under review to ensure that staff received support and direction to carry out their work and continue to provide good care for the people who live in the home.

Quality Assurance is work in progress. The deputy manager audits such things as medication each week to ensure that it is delivered safely as prescribed and audits accidents reports monthly to identify and eliminate trends. The Registered Provider said that she will be organising quality surveys for people who use the service and/or their representative to elicit feedback to improve the service in the future.

Surveys were sent to people who use the service, staff and health professionals to provide feedback to CQC. We received one response from a Northampton Social Worker who said, 'We have a number of people at Hallaton Manor, all with cognitive and physical health problems. The care they offer our clients is extremely good. The staff appear to really care about the individuals and try their best to make their lives as full and positive as they can, despite their disabilities. They manage behavioral problems effectively and try to meet individual needs wherever possible. Feedback from people who have

relatives at Hallaton Manor have nothing but praise for the high quality of care there'.

The Registered Provider, deputy managers, and other staff spoken with were positive and helpful during the inspection.

What the care home does well:

The home is clean and well maintained.

The gardens and surrounding area provide a peaceful and tranquil setting for the people who live there

There are sufficient staff to care for the people who live there.

Care plans are now comprehensive, well organised and provide clear information for care staff to ensure that they have the information they require to provide personalised care for the people who live in the home.

There is a commitment by the Registered Provider, deputy managers and staff to improving the service and they have worked well with the Local Authority and CQC to address the Requirements and Recommendations following the last Key Inspection, which have now been completed.

What they could do better:

It is recommended that all staff receive appropriate training in the use of physical intervention and restraint to ensure that they have the appropriate skills to safely manage people with challenging behaviors.

It is recommended that staff files are reviewed to ensure that they contain the required information, as detailed in Schedule 2, Care Homes Regulations 2001, and ensure that this information is readily available for inspection.

It was discussed with the Registered Provider, and strongly recommended by the Inspector, that someone should be identified and put forward for registration with CQC as soon as possible to ensure that the improvements made since the last inspection continue.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details set out on page 2.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action

Requirements and recommendations from this inspection:

Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action

Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations
1	28	It is recommended that all staff receive appropriate training in the use of physical intervention and restraint to ensure that they have the appropriate skills to safely manage people with challenging behaviors.
2	30	It is recommended that staff files are reviewed to ensure that they contain all of the required information, as detailed in Schedule 2, Care Homes Regulations 2001, and ensure that this information is readily available for inspection.

Reader Information

Document Purpose:	Inspection Report
Author:	Care Quality Commission
Audience:	General Public
Further copies from:	0870 240 7535 (telephone order line)

Our duty to regulate social care services is set out in the Care Standards Act 2000. Copies of the National Minimum Standards –Care Homes for Older People can be found at www.dh.gov.uk or got from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

Helpline:

Telephone: 03000 616161

Email: enquiries@cqc.org.uk

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