

# Review of compliance

Foundation Care (Norwich) Limited Manton Hall	
<b>Region:</b>	East Midlands
<b>Location address:</b>	Lyndon Road Manton Oakham Rutland LE15 8SR
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	April 2012
<b>Overview of the service:</b>	Manton Hall is registered to provide accommodation for persons requiring personal care for a maximum of 31 people. The home provides accommodation over two floors and is situated on the outskirts of Oakham.

# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Manton Hall was meeting all the essential standards of quality and safety.**

The summary below describes why we carried out this review, what we found and any action required.

### Why we carried out this review

We carried out this review to check whether Manton Hall had made improvements in relation to:

- Outcome 04 - Care and welfare of people who use services
- Outcome 05 - Meeting nutritional needs
- Outcome 07 - Safeguarding people who use services from abuse
- Outcome 13 - Staffing
- Outcome 14 - Supporting staff
- Outcome 16 - Assessing and monitoring the quality of service provision

### How we carried out this review

We reviewed all the information we hold about this provider and carried out a visit on 14 March 2012.

### What people told us

People who used the service told us they were happy with the service they received. People told us they liked and got on well with the staff.

### What we found about the standards we reviewed and how well Manton Hall was meeting them

#### **Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights**

People using the service experienced effective, safe and appropriate care treatment and support that met their needs.

#### **Outcome 05: Food and drink should meet people's individual dietary needs**

People were supported to have adequate nutrition and hydration.

#### **Outcome 07: People should be protected from abuse and staff should respect their**

## **human rights**

People were protected from the risk of abuse.

### **Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs**

People who used the service benefited from sufficient numbers of staff.

### **Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills**

People were safe and had their health and welfare needs met by competent staff.

### **Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care**

There were effective systems in place to assess and monitor the quality of service provided.

## **Other information**

Please see previous reports for more information about previous reviews.

**What we found  
for each essential standard of quality  
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

**Compliant** means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

## Outcome 04: Care and welfare of people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

### What we found

#### Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

#### Our findings

##### What people who use the service experienced and told us

People who use the service told us they received the care and support they needed. People said they liked the staff.

##### Other evidence

We pathway tracked three people; this involved looking at their care records, speaking with them and to staff about the care provided.

People had their needs assessed before they moved in. Assessment records were comprehensive. Care plans were formulated for each assessed need and these provided detailed instruction to staff about how they should meet people's needs. Risk assessments were also in place for all identified risks.

Care plans were person focused and took into account peoples individual needs and preferences. The provider had made significant improvements since our last visit in August 2011.

The provider employed an activities organiser. We observed people engaged in activity in the lounge. People who used the service appeared to be occupied and engaged.

##### Our judgement

People using the service experienced effective, safe and appropriate care treatment and support that met their needs.

## Outcome 05: Meeting nutritional needs

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are supported to have adequate nutrition and hydration.

### What we found

#### Our judgement

The provider is compliant with Outcome 05: Meeting nutritional needs

#### Our findings

##### What people who use the service experienced and told us

People who used the service told us they enjoyed the meals provided and that there was always a choice. People's relatives told us they often stayed for lunch and that the food was good.

##### Other evidence

We looked at people's care records and saw that risk assessments had been carried out for risk of malnutrition. Where people required support with eating and drinking, this was detailed within the care plan.

The provider had made significant improvements since our last inspection in August 2011.

##### Our judgement

People were supported to have adequate nutrition and hydration.

## Outcome 07: Safeguarding people who use services from abuse

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

### What we found

#### Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

#### Our findings

##### What people who use the service experienced and told us

We did not speak with people who used the service about safeguarding people from abuse.

##### Other evidence

We spoke with staff about training they had received in this area. Staff were knowledgeable and knew the correct action to take in the event of suspected abuse.

We looked at staff training records. All staff had received up to date training about safeguarding people from abuse.

##### Our judgement

People were protected from the risk of abuse.

## Outcome 13: Staffing

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

### What we found

#### Our judgement

The provider is compliant with Outcome 13: Staffing

#### Our findings

##### What people who use the service experienced and told us

People who used the service told us they never had to wait for long for staff to attend to them.

##### Other evidence

During our site visit, staff appeared busy but never hurried. All appeared to be in control of their appropriate activity and people's needs were attended to in a timely manner. All staff including the domestic and catering members engaged appropriately with people.

Staff spoken with said there were enough staff on duty and they did have time to meet people's needs. At the time of our site visit there were at least four members of staff on duty during daytime hours and two at night.

##### Our judgement

People who used the service benefited from sufficient numbers of staff.

## Outcome 14: Supporting staff

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are safe and their health and welfare needs are met by competent staff.

### What we found

#### Our judgement

The provider is compliant with Outcome 14: Supporting staff

#### Our findings

##### What people who use the service experienced and told us

People who used the service told us that staff were well trained and competent.

##### Other evidence

We looked at staff training records and saw that staff had received the training they required. There was an ongoing programme of staff training and development.

Staff spoken with also told us that the manager was supportive and approachable and could be contacted at any time.

##### Our judgement

People were safe and had their health and welfare needs met by competent staff.

## Outcome 16: Assessing and monitoring the quality of service provision

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

### What we found

#### Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

#### Our findings

##### What people who use the service experienced and told us

People who used the service and relatives we spoke to confirmed that they were aware of and understood their right to complain and have their concerns addressed. We found evidence of the complaints procedure on display in public areas. The manager responded to all complaints in a timely manner.

##### Other evidence

We reviewed the audit procedures and found comprehensive evidence of a planned process. Issues raised during audits were identified and recorded and once prioritised these issues were addressed by remedial action.

The manager also engaged with external health professionals as necessary in order to resolve issues whose root cause is external to the care home. A joint action plan with regards medicine management was reviewed and the actions signed off by both the local pharmacy and the manager.

A sample cross referencing of incidents was undertaken by comparing incidents recorded with care plans against the incident log. This record also explained the remedial action undertaken to mitigate future risk.

##### Our judgement

There were effective systems in place to assess and monitor the quality of service provided.

# What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

**Improvement actions:** These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

**Compliance actions:** These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action:** These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

## Information for the reader

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