



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru
Care and Social Services Inspectorate Wales

Inspection Report on

The Manor House Care Home

**St. Hilary
Cowbridge
CF71 7DP**

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Description of the service

The Manor House Care Home is a listed building situated in the village of St Hilary, which is approximately two miles from Cowbridge.

The Manor House Care Home is registered with Care Inspectorate Wales (CIW) to provide accommodation and personal care for a maximum of 30 persons. Within this total figure there may be up to 20 persons under or over sixty five years of age requiring nursing care.

The Registered Provider is The Manor House St Hilary Limited. Mrs Susan Mary Evans has the combined role of Responsible Individual (RI) and Registered Manager.

The registered manager was present during both inspection visits.

Summary of our findings

1. Overall assessment

People living at the home receive good care which supports their well-being.

People are able to exercise choice in their daily lives and their opinions are regularly sought and valued. Residents feel supported by staff who interact kindly with them.

Person centred care is provided and staff have a good understanding of each person's specific needs and preferences. The home's safe recruitment practices ensure staff that work at the service are appropriately trained and supervised which promotes improved outcomes for those living at the service.

2. Improvements

There were no recommendations identified at the last inspection.

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service. This included the following:

- Medication; recording of effect of PRN (as required) medication,
- Environment; ensure the; sluice room on the first floor is appropriately locked,
- Revision of current hand sanitation system.

1. Well-being

Summary

People living at The Manor House have their well-being valued, promoted and protected. The environment is welcoming and homely and people are happy with the standard of care and the level of support provided. People are treated with dignity and respect in their day to day care. People are supported to lead creative, stimulating lifestyles and have choice in the activities they pursue.

Our findings

People living at the home relate well and have good relationships with staff. The home has a relaxed and calm atmosphere and people expressed their happiness. Every resident we spoke with commented positively about living at the home. Comments included;

"I come and go as I please"

"The staff look after me marvellously".

Relatives visiting the home told us;

"I have no concerns whatsoever, staff are marvellous"

"I am always kept informed of any changes".

We observed care staff, the maintenance team, housekeeping and the management to have good relationships with residents. During our visit we observed warm conversations between residents and staff. Staff spent most of their time delivering care to residents, and supporting residents to participate in leisure activities. During our inspection we observed that staff supported residents in a consistently respectful and dignified manner, providing reassurance and gently encouragement. We spoke with several residents who all stated they were happy. We concluded that people are content, happy and enjoy living at the home.

People are able to choose and participate in a wide range of activities and have opportunities to socialise. People living at the home have access to planned and ad hoc group and individual social and recreational activities. We viewed the recreational activities schedule for March 2018 and found this to be extensive and varied. We spoke with the manager who stated the home understands the importance of residents' choice being

promoted and regular feedback from residents is sought to ensure any recreational activities are enjoyed and that new activities are developed in partnership with residents' wishes. During the afternoon of our second visit we observed residents listening to music by the visiting pianist and people enjoying the piano being played. We were told that residents are encouraged to request music they enjoy. We saw that records were maintained for attendance at recreational activities and we were told that these records support staff to ensure that everyone has access to appropriate activities to meet their individual needs. We concluded that people are provided with sufficient opportunities to feel involved in life at the home through participation in social/recreational activities which enhance their overall well-being.

This is a service that does provide an "Active Offer" of the Welsh language. People are able to have their service provided in Welsh without having to ask for it. However at the time of our visit there were no residents who wished to communicate in Welsh.

We spoke with the cooks on duty during both visits who had in-depth knowledge of each residents dietary needs and preferences. We observed the food preparation which was of excellent quality and presentation. The home has a rating of "5" from the Foods Standards Agency (this means that the food hygiene standards were found to be excellent). We observed people enjoying the meals provided and every resident we spoke to commented positively on the excellent meals provided.

2. Care and Support

Summary

People living at the Manor House have their needs assessed and planned using a person centred approach ensuring timely care and support is provided. Staff are knowledgeable about people's individual need, and how those needs should be met. Systems are in place to ensure that peoples' best interests are promoted.

Our findings

People receive timely, appropriate, person centred care and support. The resident care files that we considered during our inspection were extensive and stored securely. Care documentation and risk assessments were detailed and reviewed at regular intervals. Care plans were comprehensive and person centred. We also saw daily diet recordings for each individual with an assessment of daily dietary and fluid intake.

Care files contained a pre-admission assessment and the care plans were revisited soon after resident admission ensuring they remained as up to date as possible. Where changes were identified we saw care plans were reviewed in a timely manner. We saw evidence that referrals to other health and social care professionals were taking place. We were informed that residents have a choice of two GP practices which cover the St Hilary's area. The GP visits the home every Thursday to undertake regular reviews or to visit residents if requested. As The Manor House has close links with GP practices this offers residents timely responses in regards to periods of ill health. However we noted on one care file that the DNAR form on file contained a Welsh copy which we discussed with the manager who informed us the matter would be dealt with immediately?.

We observed call bells being answered throughout the visits in a timely manner and concluded that people's needs are assessed and planned for using a person centred approach ensuring timely care and support is provided.

Peoples' medication is managed safely. Medication is stored in a secure room on the first floor in individual locked medication drawers. A sample of Medication Administration Records (MARs) were examined, and we noted all medication was signed for appropriately.

We did recommend where PRN (as required) medication is administered, that this is appropriately documented to monitor the effectiveness of the medication. Therefore, people are safeguarded by the home's medication procedures.

Systems are in place to ensure that people's best interests are promoted. We saw that where people lacked the mental capacity to make important decisions relating to their life, safeguards in accordance with the Mental Capacity Act 2005 had been actioned, as Deprivation of Liberty Safeguards (DoLS) had been put in place. We noted that appropriate professionals were involved in best interest decisions and that these were reflected in people's care plans and risk assessments. We concluded that people's rights are understood, protected and promoted.

3. Environment

Summary

The service provides a relaxed and calm environment which is warm and welcoming and which meet's people needs. The home is clean, tidy and extremely well maintained. It has ample internal and external space for people to use as they wish.

Our findings

People feel uplifted and valued because they are cared for in a relaxed, calm and warm environment. The home provides accommodation over two floors. Lift access was available to the first floor. All bedrooms vary in size and design and were of single occupancy. The décor of the communal areas was luxurious and welcoming and each room contained fresh flowers which were replaced at regular intervals. We noted there was an extensive library of books for people to read if they wished. There were ample areas for people to spend time communally or on their own if they wished. Some bedrooms had en-suite facilities and we noted some had extensive views of the countryside. The home was extremely clean and tidy throughout with no malodours noted. We observed daily cleaning being undertaken and communal areas were kept hazard free. We saw maintenance staff working at the home and noted the home is furnished to a very high standard. People are able to personalise their bedrooms and we saw some residents had chose matching bedding and curtains. There was a private courtyard area where people could spend time outdoors in warmer weather. Therefore, we concluded that people live in a pleasant relaxed environment which meets their needs.

Systems are in place to ensure that the environment protects and promotes the well-being and safety of residents. During our first visit to the home we found the entrance to the home was covered by CCTV and appropriate notices were available to ensure visitors were made aware of this. CCTV also covers some other areas within the home and we noted the home has an appropriate CCTV policy in place. However, we were concerned about the procedures in place to ensure there was no unauthorised access to the home via the front entrance. We discussed this with the manager who agreed to ensure a key pad lock was provided on the front door. During our second visit we noted the key pad lock had

been installed.. We saw that safety checks and measures in relation to fire safety, portable appliances test (PAT) certificate, electricity certificate, lift safety certificate and a hoist and sling audit with appropriate maintenance schedule were satisfactory and up to date. We did find that the sluice area on the first floor, which contained chemicals which may be hazardous to health (COSHH), unlocked. We mentioned this to the manager who agreed an appropriate lock would be provided . This is to maintain safety and avoid malodour. On a tour of the building we observed there were many bottles of liquid hand gels in order to ensure infection control and hand sanitation procedures. However, we identified this as a potential hazard for some residents or visitors to the home and discussed this with the manager who agreed to consider an alternative way to ensure appropriate hand sanitation is provided. Therefore, we concluded appropriate action is taken to ensure that people are cared for in a safe and secure environment.

4. Leadership and Management

Summary

The registered manager has an open, positive and inclusive approach to running the home. The service is responsive to resident's views and is committed to continuous improvement. There is a shared commitment to provide a high standard of care and support to people living at the home.

Our findings

People can be assured that clear lines of accountability and leadership are in place. The registered manager was visible, approachable, experienced and well established. On the day of our visit we observed, and staff confirmed that the registered manager was approachable and interacted with residents and staff on a daily basis. One member of staff stated they felt "*very supported*" by the registered manager. The home offers continuity of care from a familiar staff team. During our visit we considered there to be sufficient staff available to assist people appropriately. This was reflected on the staff rota which evidenced sufficient staff numbers. We found that staff were deployed appropriately to meet the needs of the people they are caring for and management act with due diligence and care.

People can be sure that there are robust, transparent systems in place to access the quality of the service they receive, which includes feedback from people using the service and their representatives. We saw evidence of a Regulation 27 of the Care Homes (Wales) 2002 visit undertaken. The report which followed this visit was comprehensive. This demonstrated that the opinions of people living at the service were sought and identified ways in which the service would develop in order to further improve the overall experience of residents. Therefore people are provided with regular opportunities to be consulted about the service and the registered provider demonstrates a commitment to quality assurance and constant improvement.

The home's recruitment procedures and investment in staff is sufficiently high to ensure quality outcomes for residents. We examined three staff files and noted thorough pre-employment checks were in place including disclosure and barring service certificates

(DBS), references, verification of identity and full employment history. Staff received formal supervision at regular intervals as per regulatory requirements and annual staff appraisals which reviewed the work of staff over the previous year were noted on file. For nursing staff we saw that assurances had been obtained that nursing staff were registered with the Nursing and Midwifery Council (NMC). We saw evidence of extensive training being provided, for example, manual handling, wound infection, fire training, adult safeguarding and skin care. Staff told us they enjoyed their work, found it rewarding and felt supported by management. Based on the evidence, we therefore felt that the recruitment process is robust and staff are supported in a way that improves outcomes for people using the service.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

No areas of non compliance were identified at the previous inspection.

5.2 Areas of non compliance identified at this inspection

No areas of non compliance were identified at this inspection.

5.3 Recommendations for improvement

Medication; Where PRN (as required) medication is administered , consideration of the effect of the medication to be documented appropriately

- Environment ; Sluice room on the first floor to be locked appropriately due to the storage of COSSH liquids and to prevent malodour.
- Hand sanitiser throughout the home poses a potential risk Alternative measures for hand sanitation/infection control to be implemented..

6. How we undertook this inspection

Two inspectors from (CIW) carried out a full inspection as part of our inspection programme. Our visits were unannounced over two days on 6 February 2018 and 15 March 2018.

We used the following sources of information to formulate our report:

- observations of daily routines, care practices and activities at the home,
- conversations with people living at and visiting the home,
- discussion with the registered manager and other members of staff,
- examination of care documentation for three residents,
- examination of personnel files for three members of staff,
- consideration of 6 questionnaires received from residents,
- consideration of 11 questionnaires received from staff,
- consideration of 1 questionnaire received from resident representative,
- visual tour of the building,
- consideration of staff rota,
- consideration of staff supervision and training
- consideration of last three monthly quality assurance visit dated March 2018,
- consideration of previous inspection report and any other information held by CIW including any notifications and concerns since the last inspection.

Further information about what we do can be found on our website www.cssiw.org.uk

About the service

Type of care provided	Adult Care Home - Older
Registered Person	The Manor House St. Hilary Ltd
Registered Manager(s)	Susan Evans
Registered maximum number of places	30
Date of previous CSSIW inspection	29/07/2015
Dates of this Inspection visit(s)	06/02/2018 and 15/03/2018
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	The service is able to provide the 'Active Offer' to residents who require it.
Additional Information:	