

## Foundation Care (Norwich) Limited






# Manton Hall

## Inspection report

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### Ratings

Overall rating for this service	Requires Improvement	---
Is the service safe?	Requires Improvement	
Is the service effective?	Requires Improvement	
Is the service caring?	Requires Improvement	
Is the service responsive?	Requires Improvement	
Is the service well-led?	Good	

### Overall summary

We carried out an unannounced inspection of the service 6 February 2015.

Manton Hall provides accommodation for up to 30 people who require personal care. On the day of our inspection 27 people were using the service.

There was not a registered manager employed at the service. There was an acting manager who was in the process of applying to become registered. 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.

During our last inspection 24 April 2014 we asked the provider to take action to make improvements to protect people living at the service. The provider was not meeting five regulations of the Health and Social Care Act 2008. These were in relation to people's care and welfare, safeguarding people from abuse, infection control,

# Summary of findings

supporting workers and assessing and monitoring the quality of care provision. The provider sent us an action plan to tell us the improvements they were going to make. During this inspection we found that improvements had been made.

People told us they felt safe and risk was assessed. Management plans were in place and staff were following these so that risk was reduced. Staff knew how to recognise the signs of abuse and knew what action to take to protect people.

Staffing numbers and the mix of their skills met the needs of people who used the service and kept them safe.

Arrangements in place for the recording, handling, administration and disposal of medicines were not always safe and guidance for staff on the use of medicines prescribed to be used 'when required' was not clear.

Staff had received most of the training they required to meet people's needs and keep them safe. They were supervised by their line manager and had their competency assessed. People were asked for their consent to care and treatment and were able to make choices. Some people had not had their mental capacity to make decisions assessed and some staff were not clear about current guidance.

We have made a recommendation that the provider considers current guidance about the Mental Capacity Act 2005 and associated Deprivation of Liberty Safeguards.

People were supported to eat and drink enough and to maintain a balanced diet. People were offered a varied diet and were offered choice and flexibility. People said they liked the food provided.

People had access to the healthcare services they required and staff made appropriate referrals and in a timely way.

People said that staff were caring and most of the interactions we observed were kind and respectful. One person became anxious and distressed but staff did not respond to this or take appropriate action until we asked them to. While people were offered choice about how they spent their day, people were not actively involved in making decisions about their care and support. The acting manager was taking action about this.

New care planning documentation was being introduced so that care plans could be personalised. People said they received care and support in the way they preferred. Opportunities for people to pursue their hobbies and interests were limited.

Complaints were investigated and used as an opportunity for learning. Action was taken to improve the service.

Systems were in place to monitor the quality of service provision and this included seeking the views of people who use the service. People said the acting manager was approachable and accessible.

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

We always ask the following five questions of services.

### Is the service safe?

The service was not consistently safe.

There were enough staff to keep people safe and meet people's individual needs. Staff understood how to protect people from abuse and avoidable harm, but arrangements for the safe management of medicines were not in place.

Requires Improvement



### Is the service effective?

The service was not consistently effective.

Staff had received the training and support they required to meet people's needs and keep them safe. Mental capacity assessments were completed for some people who lacked mental capacity to make decisions about their care and treatment. However these did not fully meet the requirements of the MCA legislation. The quality of food and choice of meals was good and people's health needs were met.

Requires Improvement



### Is the service caring?

The service was not consistently caring.

People told us they liked the staff and had positive relationships with them, but they were not always actively involved in making decisions about their care and support. Privacy and dignity was maintained and people were mostly treated with respect and kindness.

Requires Improvement



### Is the service responsive?

The service was not consistently responsive.

People said they received care and support in the way they preferred.

Opportunities for people to follow their hobbies and interests were limited.

Complaints were used as an opportunity for learning and improvement.

Requires Improvement



### Is the service well-led?

The service was well led.

People and care staff said that the management team maintained a visible presence and engaged with them to seek their feedback on the service. The provider had systems in place to monitor the quality and safety of the service.

Good

