



Making Social Care Better for People

Inspecting for better lives

Random inspection report

Care homes for older people

Name:	The Manor House
Address:	62 Uphill Road South Weston Super Mare North Somerset BS23 4TA

The quality rating for this care home is:	two star good service
The rating was made on:	26/02/2009

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 assessment of the service. We call this a 'key' inspection.

This is a report of a **random inspection** of this care home. A random inspection is a short, focussed inspection. 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:							
Paula Cordell	0	7	1	0	2	0	0	9

Information about the care home

Name of care home:	The Manor House
Address:	62 Uphill Road South Weston Super Mare North Somerset BS23 4TA
Telephone number:	01934412207
Fax number:	01934628386
Email address:	themanorhouse@caringhome.co.uk
Provider web address:	

Name of registered provider(s):	Shreyas S.A.I.N. Ltd
Type of registration:	care home
Number of places registered:	25

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	25

Conditions of registration:								
The maximum number of service users who can be accommodated is 25								
The registered person may provide the following category of service only: Care home with nursing - Code N to service users of either gender whose primary care needs on admission to the home are within the following category: Old age, not falling within any other category (Code OP)								
Date of last inspection	3	0	1	1	2	0	0	8
Brief description of the care home								
Uphill Court is a listed building that has been converted to a registered care home with nursing. It provides accommodation for up to 25 older people with nursing needs. Accommodation is provided over two floors with a passenger lift giving easy access to one of the upper floors. The other upper floor is accessed by a stair lift. There are nineteen single rooms and three that may be shared. Seven of the rooms have ensuite facilities and all have a call bell system. Communal space is provided in a lounge in the main building and a conservatory dining room attached to the lounge. This looks out								

Brief description of the care home

onto an enclosed garden. Provision is made within the home for some activities and outings, which also enable close links with the local community to be maintained. All local facilities are within easy walking distance but some are closed in winter. Information about the home is available through a brochure that incorporates key information from the Statement of Purpose and Service User Guide. CSCI reports are displayed in the entrance to the home and available for all to read. The fees range from 348 to 650 pounds per week, with additional charges being made for hairdressing, chiropody, newspapers, escorts, toiletries and some transport. This information was provided in February 2009.

What we found:

This was an unannounced random inspection. The purpose of the visit was to review the care provided to the individuals living at The Manor House formerly known as Uphill Court.

The visit was conducted over 3 hours. During this time an opportunity was taken to speak with staff, individuals living in the home and the manager. Care records were viewed for three people and other records relating to the running of the home and systems that measure the quality of the care provided.

The provider/manager has responded to the requirements from the visit in relation to replacing a bath panel and painting the kitchen. There was one recommendation to ensure staff are aware of their roles if employed on a POVA first. The manager stated that all newly recruited staff will not work in the home unless a full Criminal Record Bureau Check is obtained. No new staff have been employed since the last visit.

Seventeen people were residing at The Manor House at the time of the visit. Care records were viewed for three people including one new person. Records were comprehensive and gave sufficient detail for staff to be able to support the person in an individual way. Care plans included risk assessments relevant to the individual including falls and the prevention of wounds. Clear records were being maintained of the care being provided and the support given. Daily records included the monitoring of the person's wellbeing.

Information relating to the assessments of individuals covered the main areas as detailed in the National Minimum Standards.

Good health care monitoring is in place including liaising with the GP where needs have changed. The manager has made a referral for an individual who is prone to falling to the local falls clinic and is liaising with both the individual's GP and family.

From talking with staff and the people in the home it is evident that the activities continue to be offered. An activity coordinator is employed to assist with this. Daily activities are offered with weekly external entertainers visiting the home. The manager said that there are plans for the home to be more part of the local community by asking neighbours in for coffee mornings and a Christmas Bazaar. From talking with staff and the manager one person is now being supported to go out in the local community with a day care worker three times a week in accordance with their plan of care.

An opportunity was taken to review the complaint book. There have been no complaints since the last visit. Three surveys were received from people using the service and it was noted that two individuals were not aware of the complaint procedure. This should be rectified.

The atmosphere in the home on the day of the visit was relaxed with good interactions noted by the staff on duty. Three staff positively commented on the changes within the home since the new manager has been in post. Comments included "I now feel valued

and better supported". Others comments included the better working atmosphere and an improved cohesive team. It is evident from talking with the staff that there is good leadership within the home.

Records were viewed in respect of quality assurance. It was evident that the manager was auditing the care provided, medication, the training and the support for staff and the environment to name a few. In addition questionnaires are sent to family and people who use the service.

The manager has developed a yearly planner which highlights when systems need to be reviewed and training is required for staff. Staff are up to date with their health and safety and statutory training. Staff said that they have been on recent training for safeguarding. One member of staff said the training is good and we only have to ask and if appropriate the manager will source the training.

The manager said that of the nineteen staff employed in the home ten are completing either an National Vocational Award at level 2 or 3 depending on experience and qualifications. The home has exceed the government's target to ensure that at least 50% of the workforce have an NVQ in care.

Sufficient staff were on duty on the day of the visit. The manager said that as occupancy increases staffing levels will be reviewed to ensure can meet the needs of the individuals living in the home.

An opportunity was taken to look around the home. All areas were clean and free from odour. The carpets in the lounge and the hallways to the new annexe have recently been replaced. A number of the bedrooms have been redecorated with new curtains and bedding purchased. It is evident that the provider is committed to providing a comfortable place for people to live.

It was noted that many of the windows are rotten with little holding the window panes in place. An action plan must be developed detailing timescales for these improvements. The manager said that quotes are being obtained but the building is listed and windows need to be replaced with like for like. A further concern is that due to the rotten wood this could compromise security of the building and could cause draughts.

The manager is in the process of making an application to the Care Quality Commission to become the registered manager. The manager said that she was waiting for a medical reference and then this will be submitted. The manager has been in post since February 2009 and there is an expectation that this will be submitted within three months of commencing in post.

What the care home does well:

There is a commitment to providing person centred care. Good health care monitoring is in place.

Individuals are supported by competent staff with relevant training. Good support mechanisms are in place to support the staff team including meetings and supervision.

There is a good rolling programme of activities for individuals living in the home.

What they could do better:

There is one requirement to develop an action plan for the replacement of the windows throughout the building.

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
1	19	23	Ensure that the building is in a good state of repair by replacing the windows. An action plan must be drawn up detailing timescales when this will be completed. Ensuring the home is secure and a safe place to live	30/11/2009

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

Reader Information

Document Purpose:	Inspection Report
Author:	CSCI
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 or

Textphone: or

Email: enquiries@cqc.org.uk

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