



Making Social Care  
Better for People

# inspection report

## CARE HOMES FOR OLDER PEOPLE

**Lawton Manor**

**Church Lane  
Church Lawton  
Stoke-on-trent  
Staffordshire  
ST7 3DD**

*Lead Inspector*  
Helena Dennett

*Unannounced Inspection*  
17th May 2007      09:30

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

<b>Reader Information</b>	
Document Purpose	Inspection Report
Author	CSCI
Audience	General Public
Further copies from	0870 240 7535 (telephone order line)
Copyright	This report is copyright Commission for Social Care Inspection (CSCI) and may only be used in its entirety. Extracts may not be used or reproduced without the express permission of CSCI
Internet address	<a href="http://www.csci.org.uk">www.csci.org.uk</a>

This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Care Homes for Older People*. They can be found at [www.dh.gov.uk](http://www.dh.gov.uk) or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: [www.tso.co.uk/bookshop](http://www.tso.co.uk/bookshop)

This report is a public document. Extracts may not be used or reproduced without the prior permission of the Commission for Social Care Inspection.

# SERVICE INFORMATION

<b>Name of service</b>	Lawton Manor
<b>Address</b>	Church Lane Church Lawton Stoke-on-trent Staffordshire ST7 3DD
<b>Telephone number</b>	01270 844200
<b>Fax number</b>	01270 882725
<b>Email address</b>	lawtonmanor@majesticare.co.uk
<b>Provider Web address</b>	
<b>Name of registered provider(s)/company (if applicable)</b>	Lawton Healthcare Limited
<b>Name of registered manager (if applicable)</b>	Mrs Sharon Smith
<b>Type of registration</b>	Care Home
<b>No. of places registered (if applicable)</b>	50
<b>Category(ies) of registration, with number of places</b>	Old age, not falling within any other category (50)

# SERVICE INFORMATION

## Conditions of registration:

1. The home is registered for a maximum of 50 service users to include:
  - \* Up to 25 service users requiring nursing care

**Date of last inspection**      16th March 2006

## Brief Description of the Service:

Lawton Manor is a care home with nursing for up to 50 older people. It is just off the A50 between Kidsgrove and Alsager, close to the village of Church Lawton.

The home is a two storey Georgian detached house, which has been converted and extended into a fifty-bedded care home. It is situated in its own grounds, which consist of landscaped gardens, walkways and patio areas. It has 44 single and three twin bedrooms situated on three floors. Twenty eight of these rooms have en-suite facilities. There are two passenger lifts and staircases. Wheelchair access is good within the building and grounds. There is a very spacious lounge and dining room, and in addition there are smaller quiet areas and a conservatory.

There are a variety of specialist bathing/showering and toilet facilities which are designed to be easier for people with mobility problems to use.

The scale of charges range between £365 - £800 per week. Additional charges are made for hairdressing, private chiropody, newspapers and telephone calls. More information can be obtained from the manager.

The latest inspection report can be obtained from the manager of the home.

# SUMMARY

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

This visit, part of the key unannounced inspection of the home, took place over 6.5 hours. It was carried out on 17 May 2007 by one inspector.

Before the site visit the manager was asked to provide information as part of the inspection. The views of residents and relatives about the home were also sought; their comments are incorporated into this report.

During the site visit the inspector spoke to the manager, some staff members and people who live at the home. The records for three people who live at the home were looked at to check the care they receive. Policies and procedures and records of medication, care plans, staffing rotas and training records were also examined.

## **What the service does well:**

Lawton Manor is well managed to make sure that it is run for the benefit of the people who live there.

People's needs are assessed thoroughly so they can be confident their needs will be met by staff working at the home.

Individual care plans were in place for each resident. These were comprehensive and up to date so that staff were well informed to provide the best care for people living at the home.

Advice from healthcare professionals such as doctors and specialist nurses is sought as necessary and acted on promptly by staff to make sure that people's healthcare needs are met.

The people who live in the home are involved in decisions about their lives and are supported in maintaining their independence as much as possible.

There are lots of activities happening in the home each day and details about these are given to the people who live at the home so they can choose which they would like to take part in.

Staff at the home provide help for the people living there so they can follow their religious beliefs.

There is a good complaints procedure in place so that the people who use the service can express their concerns and have their rights protected. No complaints have been made to the home or to CSCI since the last inspection.

The home is well maintained with beautiful gardens for people to enjoy and use in better weather.

The staff at the home are well trained and competent to carry out their duties so people using the services know that their needs will be met.

There are very good quality assurance systems in place, which ensure that the home is run for the benefit of the people who use the service.

The following comments were made on survey forms received back to CSCI before the inspection visit to the home:

- 'Lawton Manor is a delightful home. Residents and staff are like one big happy family. It is a delight to visit and it is obvious that all residents are looked after extremely well'.
- 'It is difficult to know just how things can improve as there seems to be a continual ongoing training programme for staff. Me and my family are delighted with the care given to my mother'.
- Lawton Manor 'provides a safe and friendly environment for my relative. Sharon and Co are just amazing on how they care of the people who are fortunate to live here.'

## **What has improved since the last inspection?**

There were no requirements made at the last inspection. The owners of the home have continued to improve the facilities. The corridors have been redecorated, new carpets fitted and new handles obtained for the bedroom doors.

Safety systems have been enhanced since the last inspection. New door closures to all bedroom doors have been fitted. These are wired to the fire alarm system so the safety of the people living in the home is improved if a fire should break out.

## **What they could do better:**

The owners and managers are committed to continue to improve facilities within the home to ensure that people living there are safe and comfortable.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from [enquiries@csci.gsi.gov.uk](mailto:enquiries@csci.gsi.gov.uk) or by contacting your local CSCI office. The summary of this inspection report can be made available in other formats on request.

# **DETAILS OF INSPECTOR FINDINGS**

## **CONTENTS**

Choice of Home (Standards 1-6)

Health and Personal Care (Standards 7-11)

Daily Life and Social Activities (Standards 12-15)

Complaints and Protection (Standards 16-18)

Environment (Standards 19-26)

Staffing (Standards 27-30)

Management and Administration (Standards 31-38)

Scoring of Outcomes

Statutory Requirements Identified During the Inspection

## Choice of Home

### The intended outcomes for Standards 1 – 6 are:

1. Prospective service users have the information they need to make an informed choice about where to live.
2. Each service user has a written contract/ statement of terms and conditions with the home.
3. No service user moves into the home without having had his/her needs assessed and been assured that these will be met.
4. Service users and their representatives know that the home they enter will meet their needs.
5. Prospective service users and their relatives and friends have an opportunity to visit and assess the quality, facilities and suitability of the home.
6. Service users assessed and referred solely for intermediate care are helped to maximise their independence and return home.

**The Commission considers Standards 3 and 6 the key standards to be inspected.**

### **JUDGEMENT – we looked at outcomes for the following standard(s):**

3 & 6

Quality in this outcome area is **good**. This judgement has been made using available evidence including a visit to this service.

People living at the home have had their needs assessed before moving in and have been provided with information they need to make sure that staff at Lawton Manor can meet their needs.

### **EVIDENCE:**

People wishing to live in Lawton Manor are provided with all the information they need to make sure that staff at the home can meet their needs. A copy of the assessment and proposed care plan is given to the person before they move in so that they know their needs will be met.

The following comment was made on a survey form received back to CSCI before the inspection:

'The matron (bless her heart) came to see me herself and said she had a room for me. They have been wonderful all round'.

Relatives spoken with said they looked around several homes in the area before choosing Lawton Manor. They said that the home has lived up to their expectations. They confirmed that the manager visited their relative before she moved in and that they were told of the fees and of the care that would be provided.

Intermediate care is not provided at this home so Standard 6 does not apply.

## Health and Personal Care

### The intended outcomes for Standards 7 – 11 are:

7. The service user's health, personal and social care needs are set out in an individual plan of care.
8. Service users' health care needs are fully met.
9. Service users, where appropriate, are responsible for their own medication, and are protected by the home's policies and procedures for dealing with medicines.
10. Service users feel they are treated with respect and their right to privacy is upheld.
11. Service users are assured that at the time of their death, staff will treat them and their family with care, sensitivity and respect.

**The Commission considers Standards 7, 8, 9 and 10 the key standards to be inspected.**

### **JUDGEMENT – we looked at outcomes for the following standard(s):**

7, 8, 9 & 10

Quality in this outcome area is **good**. This judgement has been made using available evidence including a visit to this service.

The health and personal care needs of people living in the home are fully met. The principles of privacy and dignity are put into practice, which means that people living at the home feel valued and respected.

### **EVIDENCE:**

An assessment is carried out when a person first moves into the home. This provides staff with the information they need to make sure that they can meet the person's needs. A care plan is drawn up from the information gained at this assessment and this is discussed with the person so that they know what to expect.

The inspector looked at the care records of three people living in the home. Most of them centred on the individual's needs. These had been updated to make sure that any changes to the person's health was identified and any changes to the care provided recorded so that all staff are aware of the changes. New paperwork on assessing the dietary needs of the individual had

been provided by the company that runs the home. These had not been fully completed by staff; the manager acknowledged the need for further training for staff on completing these forms.

Some good practice was noted. For example: one person who lives at the home who is diabetic requires insulin regularly. Members of staff draw up the insulin and double check it with the registered nurses. The person then gives herself her insulin, so promoting her independence.

The records showed that staff involve specialist nurses or doctors when needed. For example, one person had a wound that required treatment. The tissue viability nurse had been contacted and had visited the person in the home. She provided advice to staff about products to use to promote healing. There were good records kept of the condition of the wound and the healing process.

Some of the people living in the home need bed rails to make sure they are safe whilst they are in bed. Assessments regarding the safe use of these rails was in place. Discussion took place with the manager regarding the need to ensure this assessment is more detailed to include all aspects of risk.

People living in the home were very positive about the care provided. All of the people said they were happy with the staff and their attitudes. One person said, 'care is excellent it comes from the top'. Another person said, 'staff are 'kind', 'good'. Some concerns were raised about the length of time it takes to get the call bell answered.

The following comments were made on survey forms received back to CSCI before the site visit.

- 'It is a delight to visit and it is obvious that all the residents are looked after extremely well'
- 'I don't think that the care home could be improved'
- 'Me and my family are delighted with the care given to my mother'

Medicines are well managed in the home. There are systems in place to make sure that medication is given as prescribed. Suitable arrangements for the disposal of medicines are in place.

The privacy and dignity of the people living at the home was seen to be promoted and maintained during the site visit. Staff were seen to knock on bedroom doors before going in. People were seen to be treated with respect; staff spoke to them in a friendly but respectful manner. One of the people living in the home said 'without exception everyone knocks on the doors before coming into the rooms. Everyone is respectful and treats you as an individual. People are always covered up with blankets etc if needed'.

## Daily Life and Social Activities

### The intended outcomes for Standards 12 - 15 are:

12. Service users find the lifestyle experienced in the home matches their expectations and preferences, and satisfies their social, cultural, religious and recreational interests and needs.
13. Service users maintain contact with family/ friends/ representatives and the local community as they wish.
14. Service users are helped to exercise choice and control over their lives.
15. Service users receive a wholesome appealing balanced diet in pleasing surroundings at times convenient to them.

**The Commission considers all of the above key standards to be inspected.**

### JUDGEMENT – we looked at outcomes for the following standard(s):

12, 13, 14 & 15

Quality in this outcome area is **excellent**. This judgement has been made using available evidence including a visit to this service.

Social, cultural and recreational activities meet expectations so people living in the home can be confident that their needs will be met.

### EVIDENCE:

When a person first moves into the home, staff get information on their social activities and lifestyle so they can try to meet their needs wherever possible. This information is recorded in their plan of care. Everyone spoken with during the site visit said there are plenty of things to do in the home.

An activity organiser is employed to meet make sure that activities that suit the people who live in the home take place. She is well qualified and has worked for some time at the home.

One person living at the home discussed her love of poetry. When she first came into the home members of staff organised a group of people to get together to discuss poetry. As a result several poems have been written and staff are exploring the possibility of getting them published in the parish magazine. Following on from this group there are now plans to form a

historical society as some people have expressed an interest in finding out more about the history of the building and the surrounding area.

A computer with Internet access and a separate e-mail address is available for the people who live in the home to use. This enables them to keep contact with distant friends and relatives and enables them to pursue their own interests as well.

The following comments were made on a survey form returned to CSCI before the site visit.

- 'Residents are always encouraged to join in the numerous activities that occur on a daily basis'
- 'I have been in this wonderful home for two and half years and we have a wonderful person who looks after all our activities so I'm still singing and thanking God!'
- 'I forgot to mention what is very important to me; the lady who looks after the activities organises Holy Communion for all who want it and a service is held by the vicar every month'

Various outings are arranged on a regular basis. On the day of the site visit a group of residents had planned to go out for a pub lunch. Several people also regularly attend a tea dance, which is held at the local church hall.

The manager confirmed that the home can cater for people from all backgrounds irrespective of their religious beliefs or culture and all staff at the home would try to meet their needs.

Visitors spoken with said they are made to feel welcome in the home. There is a small kitchenette area with tea and coffee for anyone to use.

Everyone living at the home was very complimentary about the meals that are provided. The menus were displayed on each table and everyone is given a choice. The tables were nicely set and the dining rooms were bright and airy. People were seen enjoying their lunch in a very pleasant setting.

# Complaints and Protection

## The intended outcomes for Standards 16 - 18 are:

- 16. Service users and their relatives and friends are confident that their complaints will be listened to, taken seriously and acted upon.
- 17. Service users' legal rights are protected.
- 18. Service users are protected from abuse.

**The Commission considers Standards 16 and 18 the key standards to be.**

## JUDGEMENT – we looked at outcomes for the following standard(s):

16 & 18

Quality in this outcome area is **good**. This judgement has been made using available evidence including a visit to this service.

There are good system in place so that people who live at the home are protected from abuse and have their rights protected.

## EVIDENCE:

No complaints about the home have been made to the manager or to CSCI since the last inspection. All of the people living at the home knew the complaints procedure and all said they would approach staff or the manager if they had any concerns.

The following comment was made on a survey form received back to CSCI.

'On the odd occasion when I have voiced a concern albeit a minor one after speaking to senior carers, my concern has always been dealt with in a courteous and professional manner'.

There is a procedure on protecting people from abuse in place. All members of staff have had training on how to recognise and deal with abuse. Two members of staff spoken with showed a good understanding of the procedure.

The manager confirmed that the policy on whistle blowing is given to every member of staff on induction. One of the members of staff spoken with was asked about the policy and showed a good understanding of it.

## Environment

### The intended outcomes for Standards 19 – 26 are:

19. Service users live in a safe, well-maintained environment.
20. Service users have access to safe and comfortable indoor and outdoor communal facilities.
21. Service users have sufficient and suitable lavatories and washing facilities.
22. Service users have the specialist equipment they require to maximise their independence.
23. Service users' own rooms suit their needs.
24. Service users live in safe, comfortable bedrooms with their own possessions around them.
25. Service users live in safe, comfortable surroundings.
26. The home is clean, pleasant and hygienic.

### The Commission considers Standards 19 and 26 the key standards to be inspected.

### JUDGEMENT – we looked at outcomes for the following standard(s):

19 & 26

Quality in this outcome area is **good**. This judgement has been made using available evidence including a visit to this service.

Lawton Manor is well maintained so people live in safe, clean, comfortable and pleasant surroundings.

### EVIDENCE:

Lawton Manor is situated in its own grounds with landscaped gardens, walkways and patios. The home looks out over green fields and a canal. The manager told the inspector that the company have purchased the field that lies between the canal and the home. There are plans to trim the hedges and fence in the area so that the people living in the home will get a better view of the canal and surrounding area.

A refurbishment of the inside of the home has taken place. All of the corridor areas have been redecorated and new carpets have also been laid. New door handles have been provided for all of the bedrooms.

The nurses' stations are situated in the corridors around the home. As they are open, it is difficult for the nurses to deal with confidential telephone calls, or discussions with residents, relatives, staff and other professionals. This was highlighted at the last inspection.

The home was clean and tidy on the day of the visit. The following comment was made on a survey form received back to CSCI before the site visit.

'At the moment it is disrupted because of carpet laying and decorating. At all other times it is always fresh and clean'.

All of the people living in the home said their clothes were well cared for.

## Staffing

**The intended outcomes for Standards 27 – 30 are:**

- 27.** Service users' needs are met by the numbers and skill mix of staff.
- 28.** Service users are in safe hands at all times.
- 29.** Service users are supported and protected by the home's recruitment policy and practices.
- 30.** Staff are trained and competent to do their jobs.

**The Commission consider all the above are key standards to be inspected.**

**JUDGEMENT – we looked at outcomes for the following standard(s):**

27, 28, 29 & 30

Quality in this outcome area is **good**. This judgement has been made using available evidence including a visit to this service.

Staff working at the home are competent and well trained so people living in the home can be confident that their needs will be met.

### **EVIDENCE:**

All of the people living in the home said that the staff were very good and did their best to meet their needs. However everyone spoken with said that at times there was a delay in answering calls bells or with attending to their needs once asked. Everyone felt this was due to the number of staff working at the home rather than staff practices.

A senior member of staff was spoken with during the visit. She confirmed that staff had identified that the dependency levels of the people living in the home had increased. This meant that a lot of people needed two staff to help them to move or go to the toilet which means that some other people have to wait for help. As a result the manager has looked at the staffing levels and has agreed that one additional carer will work on all shifts. This should mean that there are more staff to respond to people asking for help so they should not have to wait as long.

The manager confirmed this and said she was waiting for the Criminal Record Bureau checks to come back so that she could then start the new staff she has recruited.

Staff were seen to respond to an emergency call very quickly on the day of the site visit. Appropriate action was taken.

There is a well established group of staff working at the home. This means that staff know the residents well. 76% of care staff has NVQ Level 2 or equivalent qualification. This means that the people living at the home can be confident that the staff looking after them are trained and competent to carry out their jobs.

A sample of personnel files was looked at during the site visit. These contained all of the necessary information required to make sure that the person was suitable to work in a care home.

Members of staff spoken with said they were supported in doing their training. Two of the care staff said that they had recently started doing an NVQ level 3 in care to enhance their skills and give them a greater understanding of the needs of the people living in the home.

Records of induction training were looked at. These were found to be satisfactory. The members of staff spoken with also confirmed that they have supervision sessions regularly. They felt this was positive as it gave them support and helped them to identify what training they needed.

## Management and Administration

**The intended outcomes for Standards 31 – 38 are:**

- 31.** Service users live in a home which is run and managed by a person who is fit to be in charge, of good character and able to discharge his or her responsibilities fully.
- 32.** Service users benefit from the ethos, leadership and management approach of the home.
- 33.** The home is run in the best interests of service users.
- 34.** Service users are safeguarded by the accounting and financial procedures of the home.
- 35.** Service users' financial interests are safeguarded.
- 36.** Staff are appropriately supervised.
- 37.** Service users' rights and best interests are safeguarded by the home's record keeping, policies and procedures.
- 38.** The health, safety and welfare of service users and staff are promoted and protected.

**The Commission considers Standards 31, 33, 35 and 38 the key standards to be inspected.**

**JUDGEMENT – we looked at outcomes for the following standard(s):**

31, 33, 35 & 38.

Quality in this outcome area is **excellent**. This judgement has been made using available evidence including a visit to this service.

The management and administration of the home is based on openness and respect and there are effective quality assurance systems in place so people living in the home can be confident that it is run in their best interests.

### **EVIDENCE:**

The manager of the home is a registered nurse and is experienced and competent in running the home. The deputy manager who supports her is also a registered nurse with several years experience.

There is a very good quality assurance system in place, which is based on seeing the views of the people living in the home. Questionnaires on different aspects of the service are sent out and the manager collates the results. There

was evidence that action is taken if any issues arise. In addition the manager completes a self-assessment covering all aspects of the running of the home. An action plan is developed for shortfalls. This is overseen by the operations manager.

Residents meetings are also held regularly and this was confirmed by the people living in the home and also by comments on the survey forms, which were received back to CSCI before the inspection visit.

Staff at the home only keep small amounts of money on behalf of the people living in the home. Records are kept of all transactions and wherever possible receipts are kept. Regular audits are done to make sure that there are no discrepancies.

There are good health and safety systems in operation at the home. One person who lives at the home has a particular interest in this area so the manager had made the health and safety manual available to them.

There was evidence that the lift and hoists are serviced regularly, however there was no evidence during the inspection visit that these had been checked in line with the LOLER (The lifting operations and lifting equipment) Regulations 1998. This was completed the day after the inspection visit and a copy of the certificate forwarded to CSCI.

Fire safety checks have been carried out. The owners of the home have enhanced fire safety by providing automatic closures on every bedroom door. This means that the doors can be left open if preferred but they will close automatically if the fire alarm sounds, to make sure that people are properly protected.

# SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Care Homes for Older People have been met and uses the following scale. The scale ranges from:

- 4** Standard Exceeded (Commendable)      **3** Standard Met (No Shortfalls)  
**2** Standard Almost Met (Minor Shortfalls)      **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion

"N/A" in the standard met box denotes standard not applicable

CHOICE OF HOME	
Standard No	Score
1	X
2	X
3	3
4	X
5	X
6	X

HEALTH AND PERSONAL CARE	
Standard No	Score
7	3
8	3
9	3
10	4
11	X

DAILY LIFE AND SOCIAL ACTIVITIES	
Standard No	Score
12	4
13	4
14	4
15	4

COMPLAINTS AND PROTECTION	
Standard No	Score
16	3
17	X
18	3

ENVIRONMENT	
Standard No	Score
19	3
20	X
21	X
22	X
23	X
24	X
25	X
26	3

STAFFING	
Standard No	Score
27	3
28	3
29	3
30	3

MANAGEMENT AND ADMINISTRATION	
Standard No	Score
31	4
32	4
33	4
34	X
35	3
36	X
37	X
38	3

Are there any outstanding requirements from the last inspection? No

**STATUTORY REQUIREMENTS**

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action

**RECOMMENDATIONS**

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1.	OP19	The position of the nurse’s stations in the home should be reviewed to ensure that staff office areas provide the opportunity for telephone calls and conversations to be conducted confidentially and in private.

## **Commission for Social Care Inspection**

Northwich Local Office

Unit D

Off Rudheath Way

Gadbrook Park

Northwich

CW9 7LT

National Enquiry Line:

Telephone: 0845 015 0120 or 0191 233 3323

Textphone: 0845 015 2255 or 0191 233 3588

Email: [enquiries@csci.gsi.gov.uk](mailto:enquiries@csci.gsi.gov.uk)

Web: [www.csci.org.uk](http://www.csci.org.uk)

© This report is copyright Commission for Social Care Inspection (CSCI) and may only be used in its entirety. Extracts may not be used or reproduced without the express permission of CSCI