

# ANTRON MANOR CARE HOME

Antron Hill  
Mabe Burnthouse  
Penryn  
TR1 9HH  
Tel: 01326 367570



Mr R Guy Davies

25<sup>th</sup> November 2019

Dear Mr R Guy Davies

I acknowledge receipt of your Regulation 28 Report in the case of Emily Daisy Sims.

I respond to your numbered concerns as follows :-

1. Lack of updating of care plans to reflect changing needs and how to manage changing needs.  
As I understand care plans in place at the time of the incident were not updated or reviewed appropriately. Our current system consists of monthly review of care plans and amendments are made to reflect care needs and any changes necessary, permanent or temporary.
2. Lack of updating of care plans to include reference to multi-disciplinary meetings or care needs meetings and decisions taken to manage changing needs.  
The previous template used for care planning did not lend itself to recording of multi-disciplinary meetings with professionals and actions required to allow for changes to be recorded in the care plan. A new care plan template has been introduced to include a more robust system for recording outcomes of meetings with professionals, this information is then reviewed and the care plan is amended and updated according to changes in need. During our last inspection in November 2018, we had some old format care plans that were in the process of being changed over, all care plans have now been changed over to the new format with regular reviewing in place.
3. Lack of provision of appropriate equipment such as adjustable beds to address changing needs.  
Any requirement for equipment is addressed through assessment by occupational therapists/ physiotherapists, we have contact with the community rehabilitation team who all support and facilitate any provision for suitable equipment that is required to support individuals. Equipment is delivered to the home by Cornwall Council Loans Department. We currently have 2 individuals with hospital beds, we also have other equipment to support individuals needs including perch stools, pressure cushions, cot sides, grab rails and walking aids.
4. Lack of provision or access to specialist advice from occupational therapists and physio therapists to assist with measures to address changing needs.  
The home has good working relationships with the community rehab Team and Occupational Therapist. We access referrals for specialist advice through the G.P practice and are very well supported by the district nursing team.

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5. The Lack of appropriate training regarding use of equipment and moving and handling.  
At the time of the incident I understand there was a lack of training. Training is scheduled regularly and monitored to ensure all staff members receive regular training. Supervision of all staff is carried out 6 times a year, where staff have opportunity to raise any concerns and discuss any additional training to support them. Our moving and handling training is carried out annually and all members of staff must attend. Our new care plan includes a manual handling assessment which provides staff with details on moving individuals safely.

## Summary

We were not responsible for this service at the time of the incident. I understand changes were made prior to our ownership. Since our ownership we have continued to implement further changes to improve the service to ensure safety of the Residents. We continually work in partnership with professionals to address individuals needs and have implemented a new care plan format and system for the review and updating. Staff continue to receive regular training and supervision to ensure they are competent in their roles. We will continue to take every reasonable precaution to try to prevent any future incident.

Yours sincerely,



A handwritten signature in black ink, appearing to be 'R. Wood'.

Managing Director