

Kimberley Residential Homes Limited

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Inspection report

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31 May 2017

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Summary of findings

Overall summary

The inspection was carried out on 31 May 2017 and was an unannounced inspection.

Kimberley Residential Home provides accommodation and personal care for up to 22 older people. At the time of the inspection there were 21 people living at the service. There were eight single rooms and seven double shared rooms. Many people were independently mobile or needed the assistance of one staff member, some were frail with poor mobility and some people were living with the early stages of dementia. The home was set in an urban area, close to shops and public transport. There was an enclosed garden and paved seating area.

At the last Care Quality Commission (CQC) inspection, the service was rated overall Good, and Requires Improvement in the 'Safe' domain.

We carried out an unannounced comprehensive inspection of this service on 12 December 2016. We found two breaches of legal requirements in relation to medicine management and poor maintenance and decoration of the premises. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach of Regulation 12, Safe care and treatment and Regulation 15, Premises and equipment, of the Health and Social Care Act Regulated Activities Regulations 2014. We undertook this focused inspection to check that they had followed their plan and to confirm that they have now met the legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Kimberley Residential Home on our website at www.cqc.org.uk

At this inspection we found the service remained Good overall and is now rated Good in the Safe domain.

The provider had dealt with the priorities identified at the last inspection to make the premises safe and more visually pleasing. However, more work needed to be carried out to ensure an even safer and more pleasant environment for people living at the service. We have made a recommendation about this.

People now received their medicines safely and when they should. There were systems in place to ensure medicines were stored and recorded correctly and safely.

People and relatives told us the staff were good and did their best at Kimberley Residential Home. Staff knew their responsibilities in keeping people safe and had raised concerns appropriately with the local authority.

Risks were assessed and staff took steps to keep people safe while at the same time being aware of people's rights. Accidents and incidents were recorded and appropriate action taken to reduce the risk of further occurrences.

People had their needs met by sufficient numbers of staff. People were protected by safe recruitment procedures.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was Safe.

The premises had the benefit of some redecoration and refurbishment, however, further work needed to be completed.

The management and administration of medicines had improved. Individual risks had been identified and management plans were in place to control the risks.

Staff helped to keep people safe by being aware of their responsibilities Safeguarding referrals had been made to the appropriate local authority.

There were suitable numbers of staff on duty to provide the care and support required. Recruitment processes ensured only suitable staff were employed.

Kimberley Residential Home Limited

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook an unannounced focused inspection of Kimberley Residential Home on 31 May 2017. This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our 12 December 2016 inspection had been made. We inspected the service against one of the five questions we ask about services: is the service Safe? This is because the service was previously not meeting a legal requirement. This inspection was carried out by one inspector.

Prior to the inspection we reviewed information we held about the service, we looked at the previous inspection report and any notifications received by the Care Quality Commission. A notification is information about important events, which the provider is required to tell us about by law.

During the inspection we reviewed people's records and a variety of documents. These included three people's risk assessments and medicine records, two staff recruitment files, staff rotas, accident and incident reports and servicing and maintenance records.

We spoke with two people who were using the service, two relatives, the registered manager and two members of staff.

We asked the registered manager to send us additional information after the visit. We asked for the photographs of the bathroom floorings when they were completed to be emailed to us. The information we requested was sent in a timely manner.

Is the service safe?

Our findings

People told us they were happy and felt safe living at Kimberley Residential Home. One person said, "They do their best, they are all nice here". A relative told us their family member was happy living in the service. They told us, "The staff are kind and caring and I feel [my relative] is safe. I have no problems at all".

At the last inspection in December 2016 most medicines were stored safely. However there were controlled drugs held within the service and these were not checked daily to ensure safe accounting. Medicine administration records were not always completed correctly. The premises were not always clean or properly maintained.

The provider sent an action plan to the Care Quality Commission (CQC) setting out their intentions to meet the legal requirements. They said in their action plan they had improved the medicines recording immediately and had enrolled all staff on record keeping training which would be complete by 31 January 2017. A work plan of redecorating and changing the flooring in the kitchen and bathrooms was set out in the action plan, to be completed between January 2017 and the end of March 2017.

The premises continued to look worn and in need of a full refurbishment. However, the work that had been identified as a priority had been carried out since the last inspection. Redecorating of hallways and the conservatory had been undertaken. The kitchen flooring had been replaced and the flooring in the bathrooms were in the process of being replaced when we visited. We asked the registered manager to send us photographs of when these were completed three days after the inspection and they did this in the timescale given. The front area of the premises was untidy looking and the back garden was overgrown to the extent that people could not go out safely on their own. Old furniture that was no longer in use was left in the back patio area. We spoke to the registered manager about this who told us a gardener had started work on this and they planned to help to get the area in a better condition for the summer months. A family member said, "It could do with decorating and tidying up, but that is not as important as the people".

We recommend the provider and registered manager undertake an improvement plan to enhance the environment and garden areas to further improve the service provided for people living at the service. We recommend this includes realistic but timely timescales.

There was an improvement in the management of medicine administration since the last inspection. Care plans to make sure staff supported people with their medicines in the way they required were detailed and individual. Controlled drugs were now checked and recorded when a senior care worker, who administered medicines handed over to the next senior on shift. At least once a day, sometimes twice. There were no gaps in recording in the medicines administration records (MAR) we checked. MAR sheets were neat and legibly written. The way topical creams were recorded had changed and the new system allowed for safer recording when care staff applied prescribed creams while delivering personal care. The registered manager carried out an audit of the medicine administration process once a week to ensure the safe administration of medicines.

Staff had attended safeguarding training and were aware of the safeguarding policy and process they were required to use if they suspected abuse. The registered manager had appropriately raised safeguarding concerns with the local authority, as informed by local procedures. They had liaised with relevant people to ensure the correct guidance and advice was available to the staff team to keep people safe. The registered manager had followed this up with a notification to CQC as they are required to do by law. People were protected by staff who knew their responsibilities to raise any concerns they had with the appropriate bodies.

Risks associated with people's care and support had been assessed and procedures were in place to keep people safe. The risks that people faced on an individual basis had been identified and assessments were in place to help staff to control and manage the risks. For example, the risks associated with personal care requirements. Some people did not always want to have a wash or a shower, because they had forgotten that they needed to wash, or they just refused. Risk management plans were in place to guide staff with the best course of action for each individual to support people to maintain their personal hygiene while observing their right to refuse. One person sometimes refused to eat their meal, thinking they had already eaten. A risk assessment guided staff to respond with a consistent approach to make sure the person did not become malnourished. Risk assessments were reviewed regularly each month and changes made to make sure the information available to support people well was up to date.

Accidents and incidents continued to be recorded appropriately. The registered manager reviewed accident and incident reports to ensure that appropriate action had been taken following the event to reduce the risk of further occurrences.

There were suitable numbers of staff to provide the care and support people were assessed as needing. A family member said, "There always seems to be enough staff". There continued to be one senior care worker and three care staff each day and two staff overnight. This changed if people's needs changed. The registered manager was in the service most days and assisted people regularly. The registered manager told us they did not have a full compliment of staff and were in the process of recruiting new staff. They said that recruiting the right people had been challenging. They had advertised previously and had not been able to employ any suitable candidates from those they interviewed. However, they had recently interviewed again and were in the process of carrying out background checks on a number of new staff. The registered manager was using agency staff to ensure they had suitable numbers to provide the care and support. However, they made sure they used the same agency staff so they had got to know people well. In addition to the care staff, a chef, housekeeper and activities coordinator were also employed to assist the running of the service. People continued to be protected by robust recruitment procedures. Recruitment records included the required pre-employment checks to make sure staff were suitable and of good character.