

Kirby Grange Limited

Kirby Grange Residential Home

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Kirby Grange Residential Care Home is a care home providing accommodation and personal care to up to 31 people aged 65 and over. At the time of the inspection there were 25 people using the service.

People's experience of using this service and what we found

People were provided with safe and compassionate care delivered by safely recruited staff who knew them well. Detailed plans of care were in place to identify how people wished for their care to be provided.

All the people and relatives we spoke with told us support was tailored to individual needs and preferences and were complimentary of the care they received.

Risks to people's health had been identified. These were monitored and managed and reviewed on an ongoing basis to track any change in their needs.

People were protected from the risk of infectious diseases as far as practicably possible. A robust infection control policy was in place and staff followed guidance in relation to COVID-19.

People's medicines were managed safely. Staff had received training in medicines management and their competency had been checked.

People's consent to care was obtained. They were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The service was well-led. The registered manager was open and transparent, and systems and processes were in place to ensure people received quality care.

People and relatives held the managers and staff in high regard and felt involved in the service. Managers and staff made themselves available and listened to any concerns raised and took appropriate action to resolve them.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was good (published 29 August 2019).

Why we inspected

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the

service can respond to COVID-19 and other infection outbreaks effectively. This included checking the provider was meeting COVID-19 vaccination requirements.

We received concerns in relation to the management of people's skin care. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Kirby Grange residential Care Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Kirby Grange Residential Home

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This included checking the provider was meeting COVID-19 vaccination requirements. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by one inspector. An Expert by Experience then contacted relatives of people who use the service via telephone on 4 February 2022. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Kirby Grange Residential Care Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Kirby Grange is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection and sought feedback from the local authority. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with three people who used the service and seven relatives about their experience of the care provided. We spoke with eight members of staff including the registered manager, deputy manager, one senior care worker and two care workers. We also spoke with the activities coordinator, housekeeper and the maintenance person.

After the inspection

We continued to seek clarification from the provider to validate evidence found and reviewed further evidence the provider submitted.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection the rating has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks associated with people's care and support needs had been assessed. Care plans and risk assessments were thorough to ensure risks were monitored safely, such as pressure care, falls and nutritional risks. Records confirmed when changes to people's needs were identified records were updated to ensure staff could continue to provide safe care.
- One person had been identified at high risk of developing a pressure ulcer. A pressure relieving mattress was in place to reduce the risk of them developing an ulcer. The risk assessment indicated the person be repositioned at 4 hourly intervals and the settings be checked daily. Records confirmed staff repositioned the person at these intervals and checked their mattress settings daily.
- The service's equipment was appropriately maintained to ensure people were safe. This included hoists, wheelchairs and walking frames.
- The environment was safely managed. People's rooms and communal areas were free from hazards ensuring people could move around the service safely.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of harm and abuse. All the people we spoke with told us they felt safe and relatives said their loved ones were cared for well. One person told us, "Oh yes! I feel safe here and looked after well." A relative told us, "Yes. I do feel [Name] is safe."
- Staff received safeguarding and whistleblowing training and knew how to keep people safe from potential harm and recognised the signs that may indicate a person was being abused. They told us they would report any concerns to managers and were aware of external agencies they could contact such as CQC and the local authority if their concerns were not listened to or acted upon.
- Accidents and incidents were reported, recorded and investigated to reduce the risk of recurrence.

Using medicines safely

- Medicines were safely managed and appropriately stored.
- People and their relatives told us they received their medicines as prescribed. One relative told us, "Staff give [Name] their medication. The records they use say they have given them their medication. Last week they gave painkillers while we were there which was reassuring."
- Medicines administration records (MAR) were in place. We reviewed several MARs and found the actual stock of medicines matched what was recorded on the MAR. This assured us people received their medicines as prescribed.
- Staff were trained in the safe administration of medicines and received regular competency checks.
- The registered manager completed medicines audits and any actions identified were promptly addressed

and investigated where necessary.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- The provider ensured visiting arrangements were safely managed and in line with government guidance.

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19, unless they have an exemption or there is an emergency. We checked to make sure the service was meeting this requirement. We found the service had effective measures in place to make sure this requirement was being met.

The Government has announced its intention to change the legal requirement for vaccination in care homes, but the service was meeting the current requirement to ensure non-exempt staff and visiting professionals were vaccinated against COVID-19.

Staffing and recruitment

- Enough suitably trained and experienced staff were deployed to meet people's needs in a timely way. During the inspection we observed staff responding to people promptly when they requested assistance. This included for people who were cared for in bed who required, for example, repositioning, personal care or support with their meals and drinks.
- All of the people and their relatives felt staffing levels were safe. Staff also confirmed they had enough time to meet people's needs. We saw they had additional time to sit and talk with people when they were in communal areas or bedrooms.
- The provider told us people were involved in the staff recruitment process. They were included on the interview panel and able to ask their own questions to prospective staff. Their feedback was used as part of the decision making process to recruit new staff
- Staff were recruited safely. Disclosure and Barring Service (DBS) checks were carried out. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Learning lessons when things go wrong

- The service learnt lessons when things went wrong. Relatives told us they were informed and updated following any incident or accident people were involved in and were satisfied with how the provider addressed these.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question good. At this inspection the rating has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The service was led by an open and transparent management team. A relative told us, "I find the manager to be open and proactive and they communicate with the family well."
- People's plans of care were detailed to ensure care delivery was person-centred and met their individual needs.
- The service focused on people achieving good outcomes through promoting independence and providing quality care.
- Staff demonstrated they were knowledgeable about people who used the service and took a person-centred approach to providing care. One relative told us, "The staff know [Name]; they're brilliant with them."
- Managers were a visible presence in the service and led by example. Throughout the inspection we observed them engaging with people and staff to ensure shifts were ran smoothly and offered support and advice where required. One person told us, "They [management] are always around."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The service had robust governance systems in place. Several audits including those for care plans, medicines and accidents and incidents were undertaken and used to identify any areas for improvement or concern.
- The service had an ongoing action plan in place. This was used to record the outcome of audits which both the provider and registered manager had access to. This meant the provider had full oversight of the service and monitor areas identified for improvement.
- There was a registered manager in place who was registered with the CQC. They ensured all legally required notifications were submitted to CQC as required, and CQC's rating of performance was displayed at the location and on the providers website.
- The registered manager ensured staff had the right information to understand people's needs and provide safe care.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and relatives told us they felt involved in the service. The service actively encouraged people to express their views, for example through meetings and surveys, so they understood their experience of care

and where any improvement could be made.

- A relative told us, "I've filled in a questionnaire recently. I do feel like they listen and will make changes if we talk to them about anything. This includes simple things like asking them to encourage [Name] to wear a jumper as we often visited, and they were wearing a coat. They took the comments on board and now they [Name] always has a jumper on."
- Staff had opportunities to feedback through regular supervisions or team meetings. Staff told us they could raise issues with management and believed they would be listened to.
- The provider invested in its staff team providing them with opportunities of additional training and promotion.
- The provider told us they took staff well-being seriously and provided access to external organisations they could contact to support them if required.

Continuous learning and improving care

- The service had implemented a computerised recording system. Relatives were assured by the system as it enabled them to oversee their family members care journey. A relative told us, "They now have an online portal app I can log into anytime and see what they and staff are doing; it identifies any problem in red, e.g. need to see the doctor. It even says which staff member is doing what."
- The registered manager told us they undertook an experiment to understand people's experience in the service by a manager 'acting' as a resident for 24 hours. This enabled them to identify any improvements that could be made in the quality of care provided.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager worked in an open and transparent way when incidents occurred at the service in line with their responsibilities under the duty of candour.

Working in partnership with others

- The registered manager worked in partnership with other agencies. This included health bodies, commissioners and other stakeholders. This enabled the service to provide joined up care in a holistic way.