

NE Lifestyles Limited Kibblesworth

Inspection report

Front Street
Kibblesworth
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Tel: 01914922946

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26 September 2019

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09 October 2019

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07 November 2019

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Kibblesworth is a care home which provides residential care for up to 16 people. Care is primarily provided for people who have sustained an acquired brain injury, but some people are living with neurological degenerative conditions. At the time of our inspection there were 12 people using the service.

Since the last inspection the provider had made the decision to no longer provide nursing care at Kibblesworth and in March 2019 this activity was removed from the home's registration.

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

Since the last inspection the provider and registered manager had made significant improvements to the operation of the service. Staff had received appropriate training and supervision, which aided their ability to effectively support people's need. A wide range of stimulating activities were now available. Medicine was now administered in a safe manner. Systems were now in place, which effectively monitored how the service operated and ensured staff delivered appropriate care and treatment.

The registered manager and staff demonstrably showed people were valued and respected. The staff were passionate about providing a range of opportunities for people to engage in meaningful activities. They delivered a wide range of different activities that were tailored to individual's likes and dislikes. We found staff were committed to delivering a service which was person-centred. People 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.

Staff took steps to safeguard vulnerable adults and promoted their human rights. Incidents were dealt with appropriately and lessons were learnt, which helped to keep people safe. People's health needs were thoroughly assessed. Staff actively promoted equality and diversity within the home.

Staff were making a difference to people's wellbeing by working well as a team, and by sharing the same values and principles. When necessary, external professionals were involved in individuals care.

Appropriate checks were completed prior to staff being employed to work at the service.

The cook and staff supported people to eat varied appetizing meals, which supported them to maintain healthy weight. The cook had reached the final for a national Great British Care award.

People's voices were of paramount importance in the service. The registered manager understood how to investigate and resolve complaints.

The service was well run. The registered manager carried out lots of checks to make sure that the service was effective and constantly looked for ways to improve the service.

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

Rating at last inspection

Requires improvement (report published 23 August 2018).

Why we inspected

This was a planned inspection based on the rating at the last inspection.

Follow up

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, we may inspect sooner.

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 effective?

Good ●

The service was effective.

Details are in our Effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our Well-Led findings below.

Kibblesworth

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 Care Act 2014.

Inspection team

An inspector completed this inspection.

Service and service type

Kibblesworth is a care home. People in care homes receive accommodation and nursing and personal 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 that 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 was an unannounced inspection.

What we did

We reviewed information we had received about the service, which included details about incidents the provider must notify us about, feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all the information to plan our inspection.

During the inspection

We spoke with four people who used the service and a relative to ask about their experience of the care provided. We also used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing

care to help us understand the experience of people who could not talk with us. We spoke with the registered manager, deputy manager, two senior carers, the occupational therapist and their assistant, four care staff, and a cook.

We reviewed a range of records. This included three people's care records, medication records and various records related to recruitment, staff training and supervision, and the management of the service.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as requires improvement. We had found medicines were not administered in a safe manner, required checks had not been completed for the mini-bus and staff had not been appropriately trained to use the facilities to secure people in wheelchairs, and the provider's guidance on fire drills was not followed. At this inspection we found these issues were resolved. The key question has improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager critically reviewed all aspects of the service and determined if and where improvements were needed. They ensured staff considered how lessons could be learnt.
- Staff understood where people required support to reduce the risk of avoidable harm. Care plans contained explanations of the control measures for staff to follow to keep people safe.
- The environment and equipment were safe and well maintained. Emergency plans were in place to ensure people were supported in certain events, such as a fire. We discussed the use of simulated evacuations and the importance of all staff, including night staff completing these on a regular basis. The registered manager confirmed they planned to commence this form of training.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding systems in place and all staff spoken with had a good understanding of what to do to make sure people were protected from harm or abuse. They had received appropriate and effective training in this topic area.
- A person commented, "The staff are lovely, and really make sure I'm safe."

Staffing and recruitment

- There were always enough staff on duty to meet people's needs. A senior carer and six care staff worked during the day and at night a senior carer plus three care staff were on duty. Also the registered manager, deputy manager, occupational therapist and their assistant, cook and ancillary staff worked at the service.
- The provider operated systems that ensured suitable staff were employed.

Using medicines safely

- People's medicines were appropriately managed. Medicines were safely received, stored, administered and destroyed. Clear protocols were in place for the use of 'as required' medicines and covert administration of medicine.
- Records showed, and staff confirmed they had received training in medicines management and they had been assessed as competent in this area.

Preventing and controlling infection

- The home was clean, and people were protected from the risk of infection. Staff had received infection

control training and said they had plenty of personal protective equipment such as gloves and aprons.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as requires improvement. We had found that staff had not received the required training and supervision they needed to meet people's needs, and staff were not completing mental capacity assessments and 'best interests' decisions, when needed. At this inspection we found these issues were resolved. The key question has improved to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The registered manager had ensured comprehensive holistic assessments were completed for people who used the service. These were regularly reviewed and updated.
- People's care was delivered in line with evidence-based guidance, which included NICE and other expert professional bodies. The registered manager ensured this informed the care plans, which assisted staff to support people to achieve effective outcomes.

Staff support: induction, training, skills and experience

- Staff had the skills and experience to support people. They received a comprehensive programme of training. Staff confirmed that they had been trained in the topics, which enabled them to work effectively with people.
- New recruits completed the Care Certificate, as a part of their induction and shadowed experienced staff for their first few shifts.
- Staff had regular supervision meetings and appraisals. Staff told us they felt supported.

Supporting people to eat and drink enough to maintain a balanced diet

- Staff encouraged people to eat a healthy balanced diet. The cooks had completed a wide range of nutritional training, including how to prepare appetising adapted diets.
- One of the cooks had been nominated for the 'Chef of the Year Award' in the 'Great British Carer' competition. Their nomination had gone forward to the final stage and had been invited to the award ceremony.
- A person commented, "The chef is excellent and the food they make is the best I have ever had."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff supported people to access healthcare services when appropriate. Records showed when people had contact with other professionals including doctors and nurses. The records described the outcomes and if there had been any changes in people's needs.

Adapting service, design, decoration to meet people's needs.

- The service was designed to meet the needs of people who may have physical disabilities. The staff had

been reviewing how to make the best use of communal areas and support people to access areas, which met their preferences and would not be over-stimulating.

- People had been supported by staff to make their accommodation homely. The registered manager and staff were in the process of researching technological solutions that would assist people to independently navigate the home, such as doors that automatically opened when people in wheelchairs approached them.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take a particular decision and any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- The registered manager ensured staff followed all the principles and guidance related to MCA and Deprivation of Liberty Safeguards (DoLS) authorisations.
- Staff ensured that people were involved in decisions about their care and knew what they needed to do to make sure decisions were taken in people's best interests.
- Staff asked people for consent before providing them with assistance and constantly asked individuals what were their preferred choices.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last comprehensive inspection this key question was rated as requires improvement. We had found staff to be caring when they engaged with people living in the home, but it was evident from the issues we found the provider was not ensuring staff received the necessary support to provide appropriate care. At this inspection we found these issues were resolved. The key question has improved to good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity; Respecting and promoting people's privacy, dignity and independence

- People were very complimentary about how the staff provided the care and support. A relative commented, "I think the staff are really fantastic. They are very caring and kind. They feel a part of our family."
- Staff consistently displayed kindness and a caring attitude. The registered manager discussed how they had worked to ensure each person was valued and respected. The registered manager had introduced a champions programme. The dignity champion was working to ensure staff understood how to support individuals within the equality legislation's protected characteristics.
- Staff demonstrated they were highly motivated and committed to respecting people's equality, diversity and human rights. Staff told us were proud to work for a service which supported people's unique differences and empowered people to choose how they wanted to live.
- All staff members, including the occupational therapy team, spoke passionately about the importance of supporting people in ways to enhance their emotional and physical well-being. For example, staff worked closely with people to assist to regain skills such as an ability to communicate their views to others.

Supporting people to express their views and be involved in making decisions about their care

- Staff encouraged people to be involved in the design their own care. Staff told us they were constantly learning about people's lived history, so they could understand any personal motivation to do something and past routines. A staff member said, "Knowing about people's lives helps us to work with them and find topics that will interest them so enhance their ability to participate in a rehabilitative activity."
- The staff showed they cared about people's views. The registered manager had set up regular 'resident and relative meetings', which were now well attended. They had reviewed participation and found offering more informal setting such as afternoon tea, Hawaiian nights led to more people coming and sharing their ideas whilst also enjoying the company of their relatives.
- The registered manager ensured, when needed, people received support from advocacy services. An advocate helps people to access information and to be involved in decisions about their lives. Information about advocacy services was on display around the home.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs.

At the last comprehensive inspection this key question was rated as requires improvement. We had found people's care records were maintained and stored in a disjointed manner and the information in the care records was inaccurate. People were not always supported in a person-centred manner and they had limited access to meaningful occupation. At this inspection we found these issues had been resolved. The key question has improved to good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control; Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were consistently asked to express their opinions about what was on offer and given choices.
- People were encouraged to enjoy a wide range of meaningful activities and access to the community. Staff worked with people to find out what they enjoyed then provided an activity programme for each person. Staff enthusiastically looked for things that would create positive experiences for people. Regular music and singing sessions were organised. The maintenance person had supported staff to create the garden in ways that were stimulating and educational. Recently people had joined in the biggest sunflower competition
- The occupational therapy team assessed people and provided a comprehensive activity programme that assisted people to relearn and develop both their physical and mental skills. They had supported people to learn new ways to communicate their views and make their needs known.
- Staff also supported people to engage in meaningful occupation in the community. They supported people to access local cafés and worked with staff in these venues to ensure individuals who needed an adapted diet could get a meal there.
- People's needs were identified, including those related to equality, and care plans created were detailed and individualised. People and relatives told us care was delivered in the way they wanted and needed it. A person commented, "This is the best place for me, Staff understand me and work with me in a way that really is so helpful."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Reasonable adjustments were made where appropriate. The registered manager had identified that the records could be further enhanced so they fully met the communication needs of people, and as required by the Accessible Information Standard.

Improving care quality in response to complaints or concerns

- People had access to information on how to make a complaint. The registered manager had thoroughly reviewed all the responses to previous complaints and worked with complainants to resolve any outstanding issues. They had a comprehensive understanding of how to investigate and resolve concerns.
- People told us any concerns were quickly addressed by the registered manager and resolved to their satisfaction. A person said, "There had been a big improvement in the management and organisation of the service, which is due to the appointment of the manager."

End of life care and support

- At the time of the inspection no one was receiving end of life care.
- Staff understood people's needs, were aware of good practice and guidance in end of life care, and respected people's religious beliefs and preferences.

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 the last inspection this key question was rated as requires improvement. We had found the provider had been making improvements to their governance arrangements, but these were not fully embedded and at times were not effective. At this inspection we found these issues had been resolved. The key question has improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility; Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The service was well-run. The provider and registered manager's vision and values were imaginative and person-centred. They made sure people were at the heart of the service.
- The provider maintained clear oversight of the service and critically reviewed the service to determine how further improvements could be made. Staff at all levels understood their roles, responsibilities and their accountability. They were held to account for their performance where required.
- The registered manager constantly kept abreast of new developments within care and ensured best practice guidance was implemented. They were committed to creating an innovative service.
- Staff were energised by their work. Every staff member was driven by people having choice and control over their own lives. Staff enjoyed celebrating people's successes no matter how small, which in turn led to people having increased confidence.
- Staff told us they felt listened to and that the registered manager was approachable. They understood the provider's vision for the service and they told us they worked well as a team.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics: Working in partnership with others.

- The provider and registered manager positively encouraged feedback and acted on it to continuously improve the service. For example, following feedback from people the provider had introduced an award programme for both people and staff. Following nominations each month one of the people and staff were recognised for their contribution and hard work. The registered manager was organising a celebration for the end of the year where a party would be held to celebrate everyone who had received these awards.
- The service worked in partnership with external agencies to deliver a high standard of care to people.
- A person commented, "The manager is great. When they first came here the home had issues, but they have certainly turned that around."

Continuous learning and improving care

- The quality assurance system included lots of checks carried out by staff, the registered manager and the regional manager.
- The registered manager provided strong leadership and their constant critical review of the service had

led to the noticeable improvements. They consulted with staff, people and relatives routinely to identify how they could enhance the service and ensure they remained at the forefront of best practice.

- Feedback from people confirmed that they felt listened to and integral to the service development.