

Kevindale Residential Care Home

Kevindale Residential Care Home

Inspection report

Kevindale
Broome, Aston On Clun
Craven Arms
Shropshire
SY7 0NT

Tel: 01588660323

Date of inspection visit:
18 August 2021

Date of publication:
10 September 2021

Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Overall summary

Kevindale Residential Care Home is a care home providing support with personal care needs to a maximum of 14 older people. Accommodation is provided in an adapted building at ground floor level. At the time of the inspection, 14 people were using the service.

Following the last inspection the provider had taken action to ensure staff received the support and training they needed to meet people's needs. People were protected by the provider's staff recruitment procedures. People received their medicines when they needed them from staff who were trained and competent to carry out the task. Infection, prevention, control procedures had improved and helped to protect people from the risk of infection. People were protected from the risk of abuse and they told us they felt safe living at the home.

Systems to monitor the quality and safety of the service provided had improved however, more time is needed to ensure systems are embedded and can be sustained over time. Audits had not identified the lack of a care plan for one person who used the service. People were provided with opportunities to express their views about the service they received. The provider was open and honest with people when things went wrong. The provider worked in partnership with other professionals to achieve good outcomes for people.

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

The last rating for this service was requires improvement (published April 2021) and there were multiple breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment, fit and proper persons employed, staffing and good governance.

At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

This was a planned inspection based on the previous rating.

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 coronavirus and other infection outbreaks effectively.

We undertook this focused inspection to check the provider had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions; safe

and well-led which contained those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has remained requires improvement. This is based on the findings at this inspection.

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

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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 well-led?

Requires Improvement ●

The service was not always well-led.

Details are in our well-led findings below.

Kevindale Residential Care 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 Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. 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

This inspection was carried out by two inspectors.

Service and service type

Kevindale Residential Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. 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. The registered manager is also the provider (the owner of Kevindale Residential Care Home). This means that they 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. We sought feedback from the local authority, professionals who work with the service and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with four people who used the service and a relative about their experience of the care provided. We spoke with five members of staff which included the provider, who is also the registered manager, the operations manager, a carer, the cleaner and an administrator.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at three staff files in relation to recruitment, supervision and training. A variety of records relating to the management of the service, including policies and procedures and quality monitoring were reviewed.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- 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 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 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Staffing and recruitment

At our last inspection the provider failed to ensure people were protected by their procedures for staff recruitment. This was a breach of regulation 19 (fit and proper persons employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 19.

- At the last inspection the provider had failed to obtain a reference from the last employer for two staff members. At this inspection we were informed that no new staff had been employed since our last inspection, however the provider confirmed that appropriate references would be obtained for all new staff employed.
- Since the last inspection the provider has updated staff application forms to request a full employment history.
- People told us there were sufficient staff on duty to meet their needs. One person said, "There seem to be plenty of staff about and they are quick to help me." A member of staff told us, "I don't have any concerns about staffing levels."

At our last inspection the provider was unable to demonstrate people were supported by staff who were skilled and competent in their role. This was a breach of regulation 18(2) (staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- Since the last inspection the provider had taken appropriate action to ensure staff were skilled and competent in their role.
- Staff told us, and records confirmed that staff had received regular supervisions to discuss their role and performance. Staff received competency assessments to monitor their knowledge and skills.

Using medicines safely

- People received their medicines when they needed them. One person told us, "I always get my tablets

regularly."

- People's medicines were stored securely, and records showed that people received their medicines in accordance with the prescriber's instructions.
- Protocols were in place for medicines prescribed on an as required basis. This helped to ensure staff followed a consistent approach and people received their medicines when they needed them.
- There was a record of all medicines received by the home and returned to the pharmacy. This meant there was a clear audit trail of medicines held at the home.

Learning lessons when things go wrong

- Records of any accidents or incidents were maintained which the provider regularly reviewed to monitor any traits and reduce the risk of the accident happening again.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at the home and with the staff who supported them. One person said, "I feel very safe here and I'm very well looked after." A relative told us, "They have gone above and beyond to keep [relative] safe."
- Staff knew how to recognise and report any signs of abuse and they told us they would not hesitate in reporting concerns to ensure people were safe.

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. At this inspection this key question has remained the same. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

At our last inspection we found systems were either not in place or robust enough to demonstrate safety or the quality of the service provided was effectively managed. This was a breach of regulation 17 (good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

Continuous learning and improving care

- Following the last inspection the provider had implemented systems to monitor and improve the quality and safety of the service provided. These included a range of audits however these had not identified that a care plan had not been put in place for one person who used the service.
- The provider now employed an operations manager to monitor and oversee the quality and management of the home and the provider's two other homes. More time is needed to ensure systems are embedded and can be maintained over time.

We could not improve the rating for well-led from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

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

- Staff were now provided with opportunities to discuss their role and performance through regular supervision sessions. A member of staff said, "I have regular supervisions now and the support is really good."
- Since the last inspection the provider had taken action to ensure staff received the training they needed and that they remained competent in their role. A member of staff told us, "The training has really improved since you (CQC) were last here. I've done so much training."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and their relatives were now provided with opportunities to be involved in planning and reviewing the care they received. One person said, "The carers have paperwork about me, and they come and have a

