

# Kavanagh Health Care Limited

# Kavanagh Place

## 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

Kavanagh Place is a residential care home providing nursing and personal care to 38 people at the time of the inspection. The service is registered to support up to 42 people. 40 people are supported in one adapted building located across four units over two floors, and a further two people are supported in separate accommodation situated off the main site across the road.

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

People had personalised risk assessments which gave staff the information needed to safely manage the risks associated with people's care. There were some inconsistencies with the recording of some of the care being delivered, however we were assured people had their needs met safely. The provider told us they would address recording concerns immediately.

People received their medicines safely and as prescribed. Medicines were stored safely and audited regularly to ensure good practice was maintained. We found two recording errors during the inspection which the provider thoroughly investigated and appropriate action was taken to minimise the risk of repeated errors.

Accidents and incidents were recorded, and actions were in place to ensure people were safe. Referrals were made to healthcare professionals when needed to ensure good outcomes for people.

The environment was safe and well-maintained. The home was clean and effective infection prevention and control measures were in place. Some areas of the home were not as well maintained as others, however there was a programme of refurbishment underway during the inspection which included the areas of concern.

There were enough staff at the home to meet people's needs. Staff were visible around the home and were readily available to support people when needed. Staffing levels were monitored, reviewed and amended when needed by the manager.

People were safeguarded from the risk of abuse. Staff had received safeguarding training and understood their role in recognising and reporting safeguarding concerns. The provider had appropriate systems in place to manage concerns of a safeguarding nature.

There was a kind and caring culture. Staff knew the people they supported well and we observed many positive interactions throughout the inspection. Relatives spoke of staff going above and beyond their duties to support their loved ones in a caring and compassionate way. One relative said, "I can't explain how happy I am with way [person] is treated, it's like [person] is one of the family. The care is second to none."

There had been multiple changes within the management team since the last inspection. The provider

ensured there was appropriate management cover during this period. Relatives told us they felt communication with the home could be improved as they were not always aware of changes at the home and did not feel they always got a response to queries.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was good (published 29 August 2018).

#### Why we inspected

We undertook this targeted inspection to follow up on specific concerns which we had received about the service. The inspection was prompted in part due to concerns received about staffing levels, leadership of the service and environmental concerns. A decision was made for us to inspect and examine those risks.

We inspected and found there was a concern with the environment and aspects of the governance of the service so we widened the scope of the inspection to become a focused inspection which included the key questions of Safe and Well-led

This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

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.

The ratings from the previous comprehensive 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 remains good. 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 Kavanagh Place on our website at [www.cqc.org.uk](http://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?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# Kavanagh Place

## 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

The inspection was carried out by two inspectors.

#### Service and service type

Kavanagh Place 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 did not have a manager registered with the Care Quality Commission. An interim manager was in place at the home whilst recruitment for a new manager was completed. This means that the provider is 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 inspection

We reviewed information we had received about the service since the last inspection and we sought feedback from the local authority. 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. We used all of this information to plan our inspection.

#### During the inspection

We spoke with two people who used the service and three relatives about their experience of the care provided. We spoke with seven members of staff including the manager, regional manager, senior care workers, care workers and maintenance staff.

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

#### After the inspection

We continued to seek clarification from the provider to validate evidence found.

# 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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

### Using medicines safely

- Medicines were safely managed, stored and administered. However, there were two instances where the medicine administration records indicated medicines had not been given as prescribed. The provider completed a thorough review of these concerns during the inspection and took appropriate action. No harm was caused.
- Controlled drugs were stored securely and safely managed.
- Staff with responsibilities for managing medicines had completed the relevant training and underwent regular competency checks.
- Medicines records were audited regularly by the management team to ensure people received their medicines safely.

### Assessing risk, safety monitoring and management

- Risks to people were identified and plans were in place to minimise those risks, but it wasn't always clear these risk plans were being followed. Some people required regular repositioning to support with skin integrity, however records did not always evidence this was taking place. There was no impact on people's skin condition, and we were assured this was a recording issue. The manager told us this would be addressed immediately.
- Risks within the environment were considered and assessed. Equipment was regularly checked to ensure it was safe to use. However, one bathroom had broken floor tiles. These were replaced before the second day of the inspection.
- Plans were in place to ensure people's needs would continue to be met in the event of an emergency.

### Staffing and recruitment

- Recruitment procedures were safe. Pre-employment checks were completed on all staff before they started employment. The manager ensured appropriate inductions took place when new staff started.
- There were enough suitably qualified staff to support people safely. Staff told us the provider had ensured safe staffing levels by using agency staff when needed.
- Staff were visible around the home and readily available to support people when needed. We observed staff supporting people with essential care tasks, such as assistance with eating and drinking, as well as spending time chatting with people and taking part in activities and games.

### Preventing and controlling infection

- Measures were in place to ensure the risks of the spread of infection were reduced. Staff had access to appropriate personal protective equipment and wore this as outlined in national guidance.

- We were assured effective infection prevention and control policies and procedures were in place at the home. Some areas of the home were not as well maintained as others, however there was a programme of re-decoration underway at the time of the inspection to address this.
- Staff and people living at the home were supported to access regular COVID-19 testing.
- Staff were supporting people to visit their loved ones at the home safely and in line with the current guidance.

#### Learning lessons when things go wrong

- Accidents and incidents were appropriately recorded and responded to by staff.
- The management team regularly reviewed this information to ensure appropriate action had been taken and steps were taken to prevent recurrence, when necessary.

#### Systems and processes to safeguard people from the risk of abuse

- People were protected from abuse and improper treatment. Staff received appropriate training and were clear on the potential signs of abuse and how to raise any concerns they might have
- Relatives were very positive about the care their loved ones received and told us they felt people were safe. Comments included; "We are all very happy, [person] is very well looked after. They [staff] are like [person's] new family. [Person] is in safe hands," and "[Person] is safe there. I have never been concerned about safety at the home."



# 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 good. At this inspection this key question 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.

Continuous learning and improving care; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- There were some inconsistencies with the recording of care. It wasn't always clear people's care was being delivered in line with their assessed needs. During the inspection we were assured people had their care needs met and the provider told us recording concerns would be addressed immediately.
- Audits and checks were in place to identify areas of concern and improvement. The quality and safety of the service was well monitored and follow up actions had been taken appropriately.
- The home did not have a manager registered with the Care Quality Commission (CQC) but a manager had been recruited. An interim manager with the support of the provider ensured there was consistent leadership during this time.
- There was a range of regularly reviewed policies and procedures in place to help guide staff.
- The manager was aware of what events they needed to notify CQC about. They had submitted notifications in line with legal requirements and displayed the rating of the last inspection.

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

- Some relatives felt communication with the home could be improved. They said messages were not always passed on to the relevant people and there was a lack of response when queries were raised. Relatives were not aware of the management changes at the home as they had not been informed.
- People living at the home and relatives were able to give feedback about the care at the home in various ways, such as informal conversations, care plan reviews and surveys.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Working in partnership with others

- People achieved good outcomes because of effective partnership working.
- Relatives felt their loved ones received good care which empowered them. Relatives spoke of people being supported to maintain their independence. One relative told us "They [staff] have been getting [person] up walking again. They're [staff] fantastic and [person] is getting independence back again".
- People were supported to achieve their goals. One person had not been able to write for a significant amount of time but with the support and encouragement of staff had started writing again.
- Staff at the home worked with other relevant health and social care professionals to maintain people's health and wellbeing. Staff made timely referrals to other services for additional input, advice and support when necessary.

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

- Incidents were discussed with people and their relatives were appropriate. There was a clear open and transparent culture that had improved since the last inspection.
- There was a duty of candour policy and the manager and provider knew their responsibility regarding this.