

The Koppers Care Limited

# The Koppers Residential Home

## Inspection report

The Street  
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## Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Inspected but not rated

Is the service well-led?

Inspected but not rated

# Summary of findings

## Overall summary

### About the service

The Koppers is registered to provide accommodation with nursing or personal care, for up to 25 people with dementia. There were 18 people being supported at the service and a person's spouse had moved in during the pandemic lockdown. The home is a detached property situated in the centre of the village of Kilmington.

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

People said they were happy with the care they received. They said staff were approachable, kind, respectful. They confirmed they had the personal care they required and did not feel rushed. Comments included, "Nothing is too much trouble", "Being looked after well, food is great", and "I am well cared for here." There was a pleasant atmosphere at the home, staff were not seen to be rushing and were observed interacting positively with people and taking their time to chat with them.

Medicines were, on the whole, safely managed. People received their medicines as prescribed from staff trained and assessed as competent in the administration of medicines. There were suitable arrangements for ordering, receiving and disposal of medicines. We found improvements were needed in relation to administration of prescribed creams, nutritional supplements and the use of thickening agents. We have made a recommendation that the service follows the NICE National Institute for Health and Care Excellence Guideline, Managing Medicines in Care Homes Published 14 March 2014.

There were enough staff to meet people's needs and new staff had received an induction and were undertaking the care certificate. Staff had all received a basic fire training but were not always clear about the actions they needed to undertake in the event of a fire. Full fire training was scheduled to take place once the new fire panel had been installed. In the meantime, the provider had recognised this as an interim training gap and had fire procedure worksheets they were going to complete with staff.

Staff responded promptly to people's call bells and systems were in place to ensure all call bells were working at the home. Where people stayed in their rooms staff undertook regular checks to ensure their safety.

The registered manager had experienced challenges as a new manager at the home. Some staff had been reluctant to embrace the changes they had implemented. This had caused some negativity and unrest and had impacted on staff morale. The registered manager and nominated individual had been working to improve the staff morale and negative culture. They said it had been a difficult time trying to change the culture at the home but felt things were improving. This

was confirmed by staff. One staff member commented, "(Registered manager) 100% believe in her and all she is doing for the home...new management does cause unrest because they change things." Another said, "Now the politics have gone I am getting on better."

The registered manager had a clear oversight of what was happening at the home and knew people's needs well. People and staff said the registered manager and nominated individual were approachable and listened to their concerns. One relative commented, "I can only tell you that both (registered manager) and (nominated individual) have been fabulous. They are always available to talk... (registered manager) is so passionate about her role; I'm not going to say 'job' as it is clearly more than just a job to her. If I've called to check on (person), (registered manager) doesn't need to go off and ask someone how he is, she knows herself."

Staff received regular supervisions and had the opportunity to raise concerns.

Good infection control processes were in use at the home. The home was clean and there were no unpleasant odours. PPE and hand sanitiser were available around the building and readily accessible for use. Most staff were wearing the appropriate PPE; however, some staff kept removing their masks and wore them around their necks and two staff had cloth masks, rather than fluid repellent masks. The registered manager and nominated individual said this would be addressed and confirmed after the inspection action had been taken.

#### Why we inspected

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We undertook this targeted inspection to follow up on specific concerns which we had received about the service. The inspection was prompted due to concerns received about staffing levels and induction of new staff, medicine management, safe care and treatment, management style and culture, A decision was made for us to inspect and examine those risks. We found no evidence during this inspection that people were at risk of harm from these concerns. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

#### 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?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question, we had specific concerns about.

Inspected but not rated

### Is the service well-led?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question, we had specific concerns about.

Inspected but not rated

# The Koppers Residential Home

## Detailed findings

## Background to this inspection

This was a targeted inspection to check on specific concerns we had about staffing levels and induction of new staff, medicine management, safe care and treatment, management style and culture.

### Inspection team

The inspection was carried out by two inspectors.

### Service and service type

The Koppers residential home is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Since the last inspection the service had a new manager registered with the Care Quality Commission. A registered manager 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 announced. We announced the inspection the day before we visited to discuss the safety of people, staff and inspectors with reference to Covid 19.

### 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 and professionals who work with the service. We asked the registered manager to send us staff rota's, the training matrix and information about people at the service and their support needs.

### During the inspection

We saw most of the people the service supported in communal areas. We spoke in depth with four people who could tell us about their experiences of care. We also spoke with the spouse of a person who had been staying at the service during lockdown to ask their views.

We spent time in communal areas observing staff supporting and interacting with people. We 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 sought feedback from relatives and advocates of everyone who lived at the home by asking the provider to send them our contact details. We received feedback from five relatives.

We spoke with the registered manager, the nominated individual, five care staff, a housekeeper and the cook. We also spoke with a visiting social care professional and a paramedic.

We reviewed medication administration records, policy and staff competence documentation and two people's care records.

After the inspection visit.

We contacted three staff by telephone to ask their views.

# 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 have not changed the rating of this key question, as we have only looked at the part of the key question, we had specific concerns about.

The purpose of this inspection was to check specific concerns we had about staffing levels and induction of new staff, medicine management and safe care and treatment. We will assess all of the key question at the next comprehensive inspection of the service.

### Staffing and recruitment

- Concerns had been raised with us prior to the inspection about staffing levels at the home and new staff not having an induction. We found there were enough staff to meet people's needs and new staff had received an induction and were undertaking the care certificate.
- The number of people living in the home since our last inspection had reduced to 18. The staff rota showed that on most day shifts a senior care assistant was supported by four care staff and at night two care staff were on duty. They were also supported by a housekeeper and a cook as well as the nominated individual and registered manager who had been in the home daily during the pandemic.
- The provider had recruited additional staff who were undergoing their induction and training to ensure all shifts had the same staff ratio. Improvements had included improved recruitment decisions to ensure applicants had the right ethos to work at the home. The registered manager said, "We select new staff for the right reason... just don't want another pair of hands...."
- Staff said they felt there were enough staff to meet people's needs. They said there was occasional unexpected staff sickness which meant they might be short but the registered manager and nominated individual would undertake care tasks to support them. When needed a local agency were used to undertake shifts in particular to undertake one to one support for a person.
- Staff confirmed that when people were in their rooms, they had regular checks. This was confirmed by the spouse of a person who was staying at the home.
- Staff and people confirmed there had been a lot of staff changes at the home. They said that new staff completed a shadow induction and had the skills required to support people safely. One person said, "I get introduced to new staff...they shadow staff and see what to do, so there is going to be consistent care. They always work with a carer who has been here a while."
- New staff told us they had received training and were completing the care certificate. Staff had all received a basic fire training but were not always clear about the actions they needed to undertake in the event of a fire. The nominated individual explained that they were having a new fire panel installed in August and training was scheduled afterwards on the new system. We discussed that not all staff were clear about fire procedures at the home and recommended they complete a refresher. The nominated individual said they had already recognised this as an interim training

gap and had fire procedure worksheets they were going to complete with staff.

- People confirmed they had the personal care they required and did not feel rushed. One person said, "I am washed and dressed every morning. I am quite happy." We saw that people looked clean and well presented. Some people required a haircut but due to the lockdown this had not been possible. However, we saw a staff member styling a person's hair in the corridor while we were at the home. Everybody we spoke with said staff were approachable, kind, respectful and they were happy with the care they received. One said, "Nothing is too much trouble" another said, "Being looked after well, food is great, and a third person said, "I am well cared for here."
- There was a pleasant atmosphere at the home, staff were not seen to be rushing and were observed interacting positively with people and taking their time to chat with them.

#### Assessing risk, safety monitoring and management

- Concerns had been raised prior to the inspection that some call bells were not working at the home and that they weren't responded to promptly, meaning people had to wait to receive care. Staff told us that each night they checked people's call bells and signed to say they were working, and they did not know any that weren't working.
- People said when they used the call bell it was answered within a reasonable time. One person said, "I do not have to wait long...come quite quickly." Quite a few people who could not use a call bell had been assessed to have pressure mats in their rooms, which would alert staff if they were walking around. Staff said it was important they responded to call bells promptly to support people who might be at risk of falling. The nominated individual said where a pressure mat had not been suitable for a person's needs, they had put in place a motion sensor.

#### Using medicines safely

- Concerns had been raised with us prior to the inspection that people's medicines were not always available to them. The registered manager explained there had been some problems with ordering and deliveries with the new electronic medicine system since the last inspection. This had been resolved by changing to a local pharmacy supplier. They said that a lot of work had been undertaken to improve the medicine management at the home. This had included, medicine audits and the registered manager and nominated individual undertaking the ordering and checking new medicines into the home.
- We identified that improvements were needed in relation to the administration of prescribed creams, nutritional supplements and the use of thickening agents. There were not always clear directions about when creams should be used or where to apply them. Records did not confirm creams had been used as prescribed. The registered manager reviewed the electronic records, which had the facility to record these details and assured us these records would be implemented as soon as possible.
- Some people were prescribed nutritional supplements; where the supplements were prescribed for daily use, records showed these had been administered. However, where supplements were prescribed to be used 'when needed' there were no records to confirm when or if they had been used. The registered manager assured us they would implement a recording system as soon as possible.
- One person required the use of a thickening agent, however there were no instructions about how to use this product. The prescription said, "use as directed". The registered manager explained staff used the manufacturers guidance and assured us the instructions would be added to the medicine's administration record and care plan. Following the inspection, the registered manager informed us they had had taken action to address the concerns raised.

We recommend the service follows the NICE National Institute for Health and Care Excellence Guideline, Managing Medicines in Care Homes Published 14 March 2014.

- Records showed oral medicines were administered as prescribed.
- Staff administering medicines had received training and had their competency assessed. Staff were observed supporting people with their medicines. There was a good interaction with people, they were patient and took the time to ensure medicines had been taken and asked if they required any pain relief.
- Medicines were stored safely and there was not an excess of stock. There were suitable arrangements for ordering, receiving and disposal of medicines, including medicines requiring extra security.
- The registered manager completed regular medicines audits which identified any shortfall. Action was taken to address any shortfalls found. For example, the recording of declined and destroyed medicines had been improved to ensure records were accurate.

#### Preventing and controlling infection

- Good infection control processes were in use at the home. The home was clean and there were no unpleasant odours.
- Staff access to the service had been reviewed as a result of COVID 19. Staff came through the laundry area to access handwashing facilities and PPE supplies. Staff temperatures were taken on arrival to ensure any possible infection was identified.
- The laundry area was run down but tidy and clean
- PPE was available around the building, for example masks, gloves and aprons.
- Hand sanitiser dispensers were placed around the building and readily accessible for use.
- Most staff were wearing the appropriate PPE; however, some staff may need reminding about the use of masks and not to remove and wear around their necks. Two staff had cloth masks, rather than fluid repellent masks. The registered manager and nominated individual were advised to review the current guidance on the use of masks. The registered manager contacted us after the inspection and told us that all staff were wearing fluid repellent masks.

# 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 have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check specific concerns we had about the management and culture of the service. We will assess all of the key question at the next comprehensive inspection of the service.

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

- Concerns were raised before the inspection about the management style at the home and the registered manager not having a clear oversight of people's needs and the running of the service. We found the registered manager had a clear oversight of what was happening at the home and knew people's needs well.
- Concerns had also been raised before the inspection about a negative culture and low staff morale at the home which was having a negative impact on people's care. We found that there had been challenges over the past six months, but the registered manager had been working to improve the staff morale and negative culture. The registered manager said it had been a difficult time trying to change the culture at the home but felt things were improving.
- People and staff said the registered manager and nominated individual were approachable and listened to their concerns. Staff confirmed it had been a challenging time with staff changes and negativity, but all felt things were improving and there had been no impact on people living at the home. Staff comments included, "(Registered manager) 100% believe in her and all she is doing for the home...new management does cause unrest because they change things...if I go to (registered manager) she will listen- I can ring her anytime day of night, she is there", "Now the politics have gone I am getting on better" and "Approachable...helped me out so much...likes to talk to staff and explain why she has made the decisions made...open dialogue with us she actually listens as does (nominated individual)...much improved."
- Relatives all praised the registered manager and the service. Comments included, "I can only tell you that both (registered manager) and (nominated individual) have been fabulous. They are always available to talk... (registered manager) is so passionate about her role; I'm not going to say 'job' as it is clearly more than just a job to her. If I've called to check on (person), (registered manager) doesn't need to go off and ask someone how he is, she knows herself" and "They have sorted everything out and kept me informed...the care and attention is second to none... I can't

fault them. (Registered manager) has been great, more attentive than any of the other managers in five years, so informative...so pleased and happy she is there..."

- A health and social care professional said they had found the service to be good at meeting the needs of the people they supported. They said, they were kept informed, had no concerns about staffing levels and had received positive feedback from the people they support. They went on to say, "I have a good dialogue with the team here."

- The registered manager attended the morning handover most days to support the staff and to know about any changes. They recognised the need to further improve communication at the home and were looking at ways to keep staff informed.

- The provider had a computerised care system which the registered manager could access remotely to monitor peoples changing needs.

- Staff received regular supervisions and had the opportunity to raise concerns. Where a concern was identified in a staff member practice, they received more frequent supervisions, with guidance and support.