

Mr T & Mrs S Kandiah

# Remyck House

## Inspection report

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## Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

**Inspected but not rated**

# Summary of findings

## Overall summary

### About the service

Remyck House is a residential care home, which can accommodate up to 29 people. The service supports older people who may be living with a diagnosis of dementia. At the time of our inspection there were 16 people living at the service.

The building has been extended and adapted, it has 2 floors, with a lift to the first floor. There is a large lounge, a reception and a dining room. All of the bedrooms have a wash basin and some an ensuite toilet and shower. There are also communal bathrooms and shower rooms. There is a secure, outside space, where people can sit or tend to the plants being grown.

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

People and relatives reported they were cared for safely. Their feedback included, "I feel safe. I can't really say why, but there are people around" and "I do feel safe. People were satisfied with the service provided overall but some felt further improvements could be made to the quality of the meals provided. Relatives reported the registered manager had been open and transparent with them about the issues identified at the last inspection and the actions they were taking to address them.

Processes were in place to keep people safe, and staff had updated their training. We observed the atmosphere in the home was calm and people were relaxed.

The registered manager and providers had taken actions to ensure people were adequately protected from the risk of fire and other required work was being completed. The environment of the home was clean and safe for people and items of equipment had been replaced where required. Staff completed checks for different aspects of people's safety, but needed to ensure these were consistently recorded. Measures were in place to reduce the risk of people falling. The provider had made necessary improvements and medicines were now managed safely at the home. Processes were in place to protect people from acquiring an infection.

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 and update

The last rating for this service was requires improvement (published 14 April 2023).

### Why we inspected

We undertook this targeted inspection to check whether the Warning Notices we previously served on the providers and the registered manager in relation to Regulation 12 Safe Care and Treatment and Regulation 13 Safeguarding of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

We use targeted inspections to follow up on Warning Notices or to check 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.

#### Recommendations

We have made a recommendation about the management of some medicines.

#### 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?**

At our last inspection we rated this key question requires improvement. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

**Inspected but not rated**

# Remyck House

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to check whether the provider had met the requirements of the 2 Warning Notices served in relation to Regulation 12 Safe Care and Treatment and Regulation 13 Safeguarding of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The concerns we had were in relation to people's safety, risk management, infection control and medicines management.

#### Inspection team

The inspection was completed by an inspector and an Expert by Experience on the first day and a medicines inspector on the second day. 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

Remyck House 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. Remyck House is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### 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 and professionals who work with the service. 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 9 people, 2 relatives, a visiting professional, 4 staff and the registered manager. We reviewed aspects of 6 people's care records and a further 6 people's medicines records. We also reviewed records related to the safety 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 our last inspection this key question was rated inadequate. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check if the providers and the registered manager had met the requirements of the 2 warning notices we served previously due to concerns we had about people's safety, risk management, infection control and medicines management. We will assess the whole key question at the next comprehensive inspection of the service.

### Using medicines safely

At our last inspection the provider and the registered manager had failed to ensure medicines were managed safely. This was a breach of Regulation 12(1) 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 12.

- Medicines were now stored securely and at recommended temperatures.
- We observed staff give medicines. The staff were polite, knew the people well, gained consent, and signed for each medicine on the medicine administration (MAR) record after giving each medicine.
- Medicine care plans were in place, these provided guidance to staff about peoples' medicines and how to support them with their health needs.
- Some people living at the home were prescribed medicines for pain relief and constipation to be taken on when required (PRN) basis. Guidance was available to staff in the form of PRN protocols or information in people's care plans to help staff give these medicines consistently.
- Some people living at the home were given medicines covertly. Covert medicines are given in a disguised format, for example in food or in a drink, without the knowledge or consent of the person receiving them. Where people's medicines were administered covertly, the provider ensured staff had carried out the necessary assessments and consulted the GP and pharmacist to safely give people their medicines.
- There was a process in place to report and investigate medicine incidents.
- The staff received training and were competency assessed to handle medicines safely.
- We were not assured there was a process in place for staff to receive and act on medicine alerts in a timely manner, for people's safety.

We recommend the provider should review their policy and processes in relation to current guidance, to ensure they receive and act on medicine alerts in a timely manner.

### Assessing risk, safety monitoring and management

At our last inspection the provider and the registered manager had failed to ensure people were provided with safe care and treatment. This was a breach of Regulation 12(1) 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 12.

- The fire risk assessment for the home had been updated since the last inspection and the fire service had also inspected the premises. The fire risk assessment identified 12 areas of fire safety which required action, which the registered manager and the providers had been addressing. We could see from their action plan, the required works had either been completed or were planned. New fire doors were about to be fitted where required and others were due to be adjusted. We will follow-up at the next focused inspection to ensure the rest of the planned works have been completed.
- Since the last inspection staff had updated their fire safety training and practiced fire drills both in the day and at night. The registered manager had ensured the required home safety checks had been completed in relation to the electrical and gas safety checks. We observed the home was clutter free and electrical items were not charged in the corridors. The fire exits were signposted and accessible. People had personal emergency plans and the list of residents was reviewed regularly and updated.
- We saw items used for cleaning which could be a hazard to people items were stored securely. People could no longer access areas such as the dry food storage cupboard, which was a potential hazard. Although doors were locked, we saw the laundry room doors were unlocked. This was brought to the attention of the registered manager for them to address. The garden had been cleared of the hazardous items and developed into a safe space for people to sit and relax and enjoy their gardening.
- If people were at risk of their skin breaking down, their records showed the frequency with which they required staff to re-position them. People's care plans documented the correct setting for their air mattress and staff we spoke with were familiar with the settings. Staff told us both the air mattress settings and the safety of people's bedrails were checked daily. The registered manager told us staff had only recently been asked to record these checks. We saw there were some gaps in the records. Further work is required to ensure all staff consistently record all of the checks they have completed.
- Staff had completed falls training. People had falls risk assessments. The registered manager and providers had made the environment safer for people. The lighting on an upstairs corridor had been improved, which had made it lighter. Loose carpets had either been repaired or were being replaced, to ensure they were not a trip hazard. People had sensor mats if required to alert staff if they fell.
- In the dining room most of the chairs now had arms to support people and more were on order. The safety of the dining room step had been reviewed after a person fell and injured themselves. However, it had not been possible to make any changes due to its location. It was marked with a high visibility strip, to draw people's attention to it.

### Preventing and controlling infection

At our last inspection the provider and the registered manager had failed to ensure people were protected from the risk of acquiring an infection. This was a breach of Regulation 12(1) 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 12.

- We were assured that the provider was preventing visitors from catching and spreading infections. The

home, the carpets and equipment were visibly clean. Relevant guidance was displayed. The bins provided all had lids as required.

- We were assured that the provider was supporting people living at the service to minimise the spread of infection. We observed staff encouraged people to clean their hands before they ate. If people had a wound, staff ensured it was securely covered in accordance with professionals' guidance and there was information for staff about how to divert people's attention away from removing their dressings.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using personal protective equipment (PPE) effectively and safely. There were PPE stations located around the home. Staff wore the PPE provided as required.
- We were assured that the provider was responding effectively to risks and signs of infection. Staff had good links with the local health care professionals and knew where to access advice.
- 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.

People were able to have visitors as they wished. There were not any restrictions in place.

Systems and processes to safeguard people from the risk of abuse

At our last inspection the provider and the registered manager had failed to ensure people were protected from the risk of abuse. This was a breach of Regulation 13(1) 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 13.

- There had been a safeguarding concern raised since the last inspection. The registered manager, providers and staff had taken the required actions and worked alongside the relevant agencies and with safeguarding processes.
- There had had been a significant reduction in the level of incident reports within the home since a person had been moved to more suitable accommodation for their care needs. This showed the risk of people either feeling unsafe or experiencing harm had reduced. The registered manager told us they had declined to admit people whom they felt staff could not support safely.
- Staff had updated their safeguarding knowledge and had access to up to date safeguarding guidance. Senior staff told us safeguarding was discussed with staff during their supervisions. The registered manager had reviewed the robustness of the safeguarding processes through a recent safeguarding audit.
- Staff had also undertaken further face to face training to refresh and develop their knowledge of how to support people living with dementia whose expression of their emotions may impact the safety of others. The training had given staff the relevant knowledge and skills to support each individual in a person centred manner. Staff told us, they now felt, "more confident" supporting people following this training. People's care plans provided staff with instructions about how to support them if they experienced signs of distress.
- We observed people were generally content and experienced good interactions with staff. People were relaxed and we saw people chatted together in the communal areas. People told us they felt safe and knew they could speak to staff if they had any concerns. Staff told us how they had been trying to encourage people to spend time in various parts of the home and had arranged a variety of activities for people to join in, to keep them stimulated and engaged.

