

Saivan Care Services Limited

# Keewan Lodge

## Inspection report

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11 June 2021

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## Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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# Summary of findings

## Overall summary

### About the service

Keevan Lodge is a residential care home providing personal care to people with learning disabilities and mental health conditions. The care home accommodates three people in a terraced house and was fully occupied at the time of the inspection.

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

Improvements had been made to how medicines were managed. People received their medicines safely and as prescribed.

The provider had also made improvements to how they managed infection prevention and control and the risks associated with the COVID-19 pandemic.

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 19 February 2021) and there were breaches of regulation around the safe management of medicines, infection prevention and control and good governance.

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of one of the regulations (regulation 12). The second regulation in breach will be assessed at a future inspection.

### Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulation 12 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.

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 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 COVID-19 and other infection outbreaks effectively.

### 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**

# Keevan Lodge

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 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

Keevan Lodge 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. 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 inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We reviewed the action plan submitted by the provider following the last inspection. 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 six members of staff including the nominated individual, registered manager, senior care workers and care workers.

We reviewed a range of records. This included one person's care records and three people's medication records. A variety of records relating to the management of medicines and infection prevention and control, including policies, training records and audits 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 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 if the provider had met the requirements of the warning notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

### Using medicines safely

At our last inspection the provider did not always manage medicines safely to ensure people received their medicines as prescribed. This was a breach of regulation 12 (Safe Care and Treatment) 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 for this reason.

- The service had made improvements around the safe management of medicines. Effective systems were now in place to ensure people received the right medicines and at the right time.
- The service conducted daily audits of medicines stocks to ensure people received their medicines correctly. However, we found on one occasion that staff carrying out the audit had failed to identify a mistake, potentially from the pharmacy, and did not record the right quantity of a medicine received into the home. We fed this back to the registered manager on inspection, requested them to investigate and inform us of the outcome, which was done following the inspection with actions taken to reduce the likelihood of this occurring again.
- We carried out a thorough check of the service's medicines management including counting tablets and cross-checking our findings with Medication Administration Records (MAR). We found records were clear and medicines were suitably stored.
- Most people who were taking 'when required' (PRN) medicines had appropriate protocols in place to guide staff on when to administer these medicines. One person who was taking a meal replacement drink as PRN did not have a protocol in place. We recommended for this to be implemented as soon as possible.
- The registered manager ensured staff were trained and competent to administer medicines.

### Preventing and controlling infection

At our last inspection the provider did not ensure adequate infection prevention and control measures were in place. This was a breach of regulation 12 (Safe Care and Treatment) 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 for this reason.

- The service had made improvements around their management of the risks associated with the COVID-19 pandemic. Risk assessments were now in place for people, staff and the overall service which assessed individual risks and provided guidance for staff and the provider on how to keep people and staff safe. For example, where staff had to work across multiple services, which had reduced significantly since the last inspection, risk management plans were in place to minimise the risks this posed for people using the service.
- Organised systems were in place to monitor testing for people, staff and visitors.
- Additional cleaning measures were now in place and documented checks were carried out to ensure that cleaning tasks were appropriately completed.
- Systems were in place to ensure visiting to the service was carried out safely, for example, rapid testing and temperature checks were completed before visitors could access the service.
- The provider maintained stocks of Personal Protective Equipment (PPE) and we observed staff wore PPE appropriately in line with government guidelines.
- Staff had adequate training in infection control in response to the additional risk posed by the COVID-19 pandemic. We saw up to date training certificates for COVID-19 awareness and infection prevention and control.
- Following the last inspection, the provider had reviewed and updated their policies and contingency plans for COVID-19 which were more reflective of current national guidance and best practice.