

## Hallmark Care Homes (Wimbledon) Limited

# Kew House

### Inspection report

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### Ratings

#### Overall rating for this service

Requires improvement 

#### Is the service safe?

Requires improvement 

### Overall summary

We carried out an unannounced comprehensive inspection of this service on 16 July 2014 at which a breach of legal requirements was found. The service continued to be in breach of legal requirements during a comprehensive inspection on 9 and 19 June 2015. Medicines management was not always safe and we found that people did not always receive medicines appropriately. Due to our concerns and the continued breach of legal requirements we issued a warning notice which the provider was required to comply with by 15 August 2015.

We undertook a focused inspection on the 14 September 2015 to check that they now met legal requirements. This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Kew House' on our website at [www.cqc.org.uk](http://www.cqc.org.uk). Kew House

remains in breach of one other regulation in relation to good governance. They have informed us they will take the necessary action to address that breach by 31 October 2015.

Kew House is registered as a care home for up to 81 adults. It provides accommodation for people who require personal care and nursing. The home was divided into three units across three floors, which were each called 'a community'. The ground floor was for people with a lower level of needs and who required personal care. There was a dementia community on the middle floor which offered nursing support for people with dementia. The top floor was for older people who required nursing care. At our inspection on 14 September 2015 67 people were using the service.

At our focused inspection on the 14 September 2015, we found the registered provider had followed their plan and legal requirements in relation to medicines management had been met.

# Summary of findings

We saw that people received their medicines as prescribed. Staff followed safe procedures when administering medicines. The records for some medicines and blood tests had been updated which showed clearly that medicines had been given safely.

Nurses and senior care staff who had responsibility for medicines had received training in the safe handling of medicines.

We saw that people who chose to look after their own medicines were supported to do so safely.

# Summary of findings

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service safe?**

We found that action had been taken to improve the safety of the service. Improvements had been made to ensure people received their medicines as prescribed.

Medicines were administered safely and we saw that people's preferences were taken into account. Systems were in place to check that blood tests had been done and doses altered as needed. Individual protocols were available to support staff giving medicines to people who were prescribed them to be taken 'when required'

The registered provider was now meeting legal requirements with regards to safe medicines management. While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for 'safe' at the next comprehensive inspection.

**Requires improvement**



# Kew House

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook a focused inspection of Kew House on 14 September 2015. This inspection was completed to check that improvements to meet legal requirements planned by the registered provider after our comprehensive inspection

on 9 and 19 June 2015 had been made. We inspected the service against one of the five questions we ask about services: is the service safe? This is because the service was not meeting legal requirements in relation to that question.

The inspection was undertaken by one pharmacist inspector. Before our inspection we reviewed the information we held about the home, this included the registered provider's action plan, which set out the action they would take to meet legal requirements.

At the visit to the home we spoke with the registered manager, regional manager, three nurses and one senior care worker. We looked at four people's care records which included assessments, care plans and risk assessments relating to medicines. We looked at medication administration records on all three communities and saw the storage arrangements for medicines.

# Is the service safe?

## Our findings

At our previous inspection on 9 and 19 June 2015 people were not protected against the risk associated with medicines. We found that stock counts did not reconcile with the expected amounts of medicines and there were unexplained gaps in medicine administration records. This indicated people had not always received their medicines as prescribed. A person had not been supported to have a blood test used to decide the quantity of a medicine they should be prescribed, this meant the person may have been at risk from taking the wrong dose of medicine. Guidance for 'as required' medicines did not contain sufficient guidance to staff as to when these medicines should be administered, particularly for people who were unable to communicate verbally. Systems and audits to check medicines management were not effective and did not capture the concerns we identified.

During this inspection we observed medicines being given to people in the home. This was done in a safe and individual way. Some people needed more time to take their medicines and some people needed additional support. This was given to them in an unhurried way.

Medicines administration was recorded clearly and medicines were counted to check that the correct amount remained. This showed that medicines had been administered accurately. Some topical creams were applied by care staff when supporting people with their

personal care. These were recorded on separate charts and 'body maps' showed staff where these creams were needed. Blood tests were undertaken when required and any dose changes for people's anticoagulant medicine were recorded accurately.

Some people were prescribed medicines to be given 'when required'. There were protocols available to support staff when giving these medicines. Where people could not communicate their need, this was outlined in the protocol and a description of how the person may show that the medicine was required was noted.

Some people chose to look after their own medicines. We saw that they were supported to do so safely and their ability to manage this was checked regularly.

Nurses and senior care workers had received updated medicines training and had regular supervision to check their practice to ensure they supported people safely with their medicines.

Managers undertook regular audits to check that the medicines were handled and administered safely. The supplying pharmacy also undertook audits and action plans were produced and followed up where it was noted that practice could be improved.

People received their medicines as prescribed and safe medicines management was in place. The service was now meeting Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.