

Athena Care Homes (Kings Lynn) Limited Goodwins Hall Care Home

Inspection report

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Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated

Summary of findings

Overall summary

Summary

About the service

Goodwins Hall Care Home is a care home, providing nursing and personal care to up to 78 people. The service provides support to people with nursing care and support needs. At the time of our inspection there were 67 people using the service. The care home accommodates people across two floors and each floor is divided into units named Kingfisher, Skylark and Canary.

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

People we spoke with told us they felt safe and well cared for living at the service. People were able to tell us of improvements that had been made to their care following a serious incident. This had supported people to feel safe.

In response to the serious incident, the provider was able to demonstrate actions taken to reduce the risk of reoccurrence, including updates to people's care plans and risk assessments. They were also able to show external advice and guidance sourced from specialist professionals.

Ongoing support was in place for staff and people who witnessed the serious incident, to maintain their wellbeing.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive ways possible and in their best interests; the policies and systems in the service supported this practice. However, greater consideration was required where people were known to be at risk of neglecting their personal hygiene or declining to have their clothing regularly laundered.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was good. (Published 18 September 2019).

Why we inspected

The inspection was prompted in part by notification of an incident following which a person using the service died. This incident is subject to further investigation by CQC as to whether any regulatory action should be taken. As a result, this inspection did not examine the circumstances of the incident. However, the information shared with CQC about the incident indicated potential concerns about fire safety risks and the management of risk of harm to people's health and welfare. This inspection examined those risks. This was a targeted inspection that considered safe care and treatment.

Findings from this inspection do not change the previous rating for the service. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Goodwins Hall Care Home on our

website at www.cqc.org.uk

The five questions we ask about services and what we found

We always ask the following five questions of services.

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

Inspected but not rated



Goodwins Hall Care Home

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 under the Health and Social Care Act 2008.

This was a targeted inspection following a fire at the service.

Inspection team

This inspection was completed by one CQC inspector.

Service and service type

Goodwins Hall 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. Goodwins Hall provides 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 manager in post, who was in the process of completing the registration process.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

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 reviewed information we held about this service on our system. We liaised with the local authority quality assurance team. We used all this information to plan our inspection.

During the inspection

We spoke with the manager, group operations director, members of staff including ancillary. We spoke with 2 people living at the service, and observed care provided in communal areas of the service. We reviewed 10 people's care records, and a range of other records relating to the running of the service.

Feedback was provided to the manager, group operations director and other members of the provider and management team at the end of our inspection visit. The care provider has continued to provide us with updates following our inspection. We have continued to liaise with external stakeholders following our inspection.

Inspected but not rated

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 good. 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 safety and risk management within the care environment to maintain people's safety and welfare. We will assess the whole key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management

- People had individual smoking risk assessments and Personal Emergency Evacuation Plans (PEEP) in place, but not individual fire risk assessments, where previous fire safety concerns had been identified. The care provider was updating their recording systems to ensure each person had an individual fire risk assessment as an outcome of this incident.
- Where people were known to be at risk of neglecting their personal hygiene, or declining to have their clothing regularly laundered, we identified the need for the service to review associated risks collaboratively with other health and social care professionals and consider risks in line with the Mental Capacity Act (2005) and where required, use of best interest decisions.
- Where people required use of emollients and creams to care for their skin, associated fire risks had not been reflected in their care records prior to this incident, and had not been reflected on each person's PEEPS, only for those who smoked. We requested for each person's records to be updated to ensure known risks were accurately reflected.
- Improvements to designated smoking areas were identified, to ensure there were suitable ashtrays in place and clear signage. We identified additional outside areas were being used by staff to smoke, without the required safety measures in place. The provider gave assurances the garden areas of the service were regularly checked as part of the manager's daily walk arounds, but the risks identified during our inspection had not been identified through the service's own checking processes.
- Daily shift handover records, and PEEPS would benefit from further development to ensure these included details of those people wishing to smoke to ensure staff were aware of this information and any associated risks. We received assurances from the provider they were actively making required changes to documentation in response to this incident.
- Maintenance checks of safety equipment were in place, and the care provider also completed their own health and safety audits of the service. Records showed regular practices of fire drills and evacuations were completed. The care provider was arranging for works to commence to replace some internal fire doors.
- We received confirmation from the provider the service consistently operated on higher staffing levels than assessed to be required to enable staff to respond to people's needs or in the event of an emergency, including on the day of this incident.
- The provider had implemented additional training for staff, and support mechanisms to ensure staff and people who witnessed the incident had access to specialist services such as external counselling following this incident.