

Kingsley Care Homes Limited

Kirkley Manor

Inspection report

3 Kirkley Park Road
Lowestoft
Suffolk
NR33 0LQ

Tel: 01502573054
Website: www.kingsleyhealthcare.com

Date of inspection visit:
22 August 2018
28 August 2018

Date of publication:
27 September 2018

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

Kirkley Manor is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. Kirkley Manor is registered to provide personal and nursing care to a maximum of 71 older people.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

The service continued to protect people from the risks of abuse or avoidable harm and risks to people were identified and planned for. Medicines were managed and administered safely and the premises remained clean and there were processes in place to reduce the risk of the spread of infection.

The service continued to ensure that there were enough staff to meet people's needs in a timely way and that recruitment procedures were safe.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service continued to support this practice.

The service provided people with a choice of adequate food and drink. Support people required to maintain good nutrition and hydration was reflected in care planning. People were supported to have contact with other health professionals where appropriate.

People received care from staff who had the training, skills and experience for the role. The service continued to promote and reward excellence in staff practice.

People told us staff were kind to them and the service continued to promote a culture of kindness, with the registered manager, staff and senior managers leading this practice.

The service continued to offer people personalised care based on their individual preferences and to involve people and their representatives in the planning of care.

People were provided with adequate sources of meaningful engagement and were supported to feedback their views and experiences through meetings and surveys. People were made aware of how they could complain and the service continued to respond to complaints appropriately.

The registered manager and other staff were undertaking training on the Gold Standards Framework for end of life care in order to make and maintain improvements to care planning.

The registered manager, senior managers and the provider continued to operate an effective system to monitor the quality of the service provided to people. Areas for improvement were identified and acted upon. The service continued to work towards an improvement plan which set out future changes and improvements to the service people were provided with.

Further information is in the detailed findings below.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe? The service remains good.	Good ●
Is the service effective? The service remains good.	Good ●
Is the service caring? The service remains good.	Good ●
Is the service responsive? The service remains good.	Good ●
Is the service well-led? The service remains good.	Good ●

Kirkley Manor

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 checked 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.

This comprehensive inspection was carried out by two inspectors and an Expert by Experience on 22 and 28 August 2018 and was unannounced. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Prior to the inspection we reviewed the contents of notifications received by the service. Services have to notify us of certain incidents that occur in the service, these are called notifications.

We used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

Some people using the service were unable to communicate their views about the care they received. We therefore carried out observations to assess their experiences throughout our inspection. We spoke with five people using the service, three relatives, four care staff, the cook, a domestic staff member, the registered manager and two senior managers representing the provider.

We reviewed 12 care records, three staff personnel files and a sample of records relating to the management of the service.

Is the service safe?

Our findings

At the last inspection on 4 February 2015 the service was rated good in this key question. At this inspection the service remains good in this key question.

People told us they felt safe living in the service. One person said, "I've had a very troubled past and I feel very safe here now." Another person told us they felt safe, commenting, "They've got security on the doors. There are lots of staff and you can always speak to the manager."

The service continued to operate systems which protected people from the risk of abuse and avoidable harm. Each person had a set of personalised assessments which identified any areas of risk. Where risk was identified these risks were appropriately planned for and managed. Incidents and accidents were monitored and investigated and actions were taken to reduce the risk of repeat incidents.

The service continued to ensure that there were sufficient staff deployed on each shift to meet people's needs in a timely way. The registered manager completed dependency assessments for each person using the service to determine the number of staff required to meet their needs and this informed the overall staffing level. The registered manager and provider continued to monitor the effectiveness of the staffing level through audits of call bell response times and observations. The service continued to practice safe recruitment procedures. People told us they felt there were enough staff to meet their needs. One said, "Yes there's enough. [Staff are] about all the time." Another person told us, "I think there are [enough staff]." A relative commented, "The staff are prompt and attentive."

Medicines were managed and administered safely in the service. We compared the number of medicines remaining in the packets to the records of medicines administration and found these matched. The service continued to operate an effective system to monitor medicines administration and identify any errors or areas for improvement in staff practice. People told us they received appropriate support from staff with their medicines. One person said, "Oh yes that's all done properly." Another person told us, "Yes I get [my medicines] okay."

Appropriate procedures were in place to ensure the cleanliness of the service and we observed that the premises appeared clean and free from unpleasant odours. The registered manager continued to operate systems to monitor the cleanliness of the service and ensure the risk of the spread of infection was minimised. People told us they felt the service was clean. One person said, "It's nice and clean here." Another person commented, "The cleaners work hard." A relative told us, "I'm very happy with the cleanliness."

The service learned lessons when things went wrong and made changes to reduce the risk of repeat incidents. For example, where errors in medicines administration occurred investigations were conducted and appropriate support and monitoring of staff implemented.

Is the service effective?

Our findings

At the last inspection on 4 February 2015 the service was rated good in this key question. At this inspection the service remains good in this key question.

The service continued to assess people's needs before they came to live at the service. People's care was planned having taken into account best practice guidance, legislation and standards to ensure it was effective.

The service continued to ensure that staff had appropriate training and development for the role. Staff demonstrated a good knowledge of subjects they had received training in and told us they were supported to obtain further qualifications if they wished. The service continued to operate procedures to assess the competency of staff and identify areas for improvement. The service recognised and rewarded staff for good practice, holding a 'care awards' event annually where staff were presented with awards for excellence. People told us they felt the staff were well trained. One person said, "I think [staff] know what they're doing, no I have no concerns, the staff are very good." Another person commented, "The nurses and carers are marvellous." A relative told us, "[Staff] seem to be well trained and know what they're doing."

Staff told us they felt well supported by the management of the service and had access to regular one to one sessions with their manager where they could discuss any issues or training needs. Staff also had an annual appraisal, setting goals and objectives for the next year to develop the staff team and offer opportunities for growth.

People were offered a choice of suitable food and drink in line with their needs. The service continued to operate systems to identify where people were at risk of malnutrition or dehydration and implement effective measures to reduce the risk. Observations of the lunch time meal demonstrated that people were supported appropriately to eat their meals. People told us the food they were offered was of good quality and they had adequate choice. One person said, "We talked about my meals and I told them I like quorn mince so that is what the [kitchen staff] get and cook specially for me. Also a favourite of mine is scrambled egg and I often have it for breakfast." Another person told us, "You can get snacks if you want - crisps or something. While it's been hot there's been lollies or ice cream which is nice."

People told us that the service continued to support them with accessing support from external healthcare professionals such as GP's, dentists and opticians. One person said, "The doctor comes every Tuesday. If you need to see one of them you get the staff to put you on the list." A relative told us, "The GP comes, as do [the optician]. The staff even sort out [relative's] hearing-aid batteries. That's really good."

At the time of our visit some parts of the service were being redecorated and we were told that stimulating items such as pictures would be placed back on the walls once this was complete. Other areas of the service were decorated in a way which would help a person living with dementia orientate themselves and find their way to key areas such as the toilet or dining room. Meeting minutes demonstrated people had been involved in discussions about improvements and changes to the décor.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The service continued to act in accordance with the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards. People were supported in the least restrictive way possible and were encouraged and enabled to make decisions according to their ability. People told us that staff asked their consent before providing care to them. One person said, "As I say they pretty much do what I ask." Another person told us, "I have to say the staff are quite considerate."

Is the service caring?

Our findings

At the last inspection on 4 February 2015 the service was rated good in this key question. At this inspection the service remains good in this key question.

Staff, the registered manager and senior managers continued to promote a culture of caring. We observed that staff interacted with people in a kind, caring and personalised way. It was clear from our observations that all staff, including the registered and senior managers had taken time to get to know people personally. For example, we saw staff talking with people about the football or a television programme.

People told us that staff were kind and caring towards them. One said, "Oh it's very good. Oh the staff know me very well. They've got to know me while I've been here. They're kind and caring people." Another person told us, "I get on well with the staff. We have a good laugh. They know me very well and have been very kind to me."

People told us that staff continued to respect their privacy and uphold their dignity. One said, "I usually have my door open but if I feel like having some time out with the door shut and my headphones on to stop my music blaring out, the staff leave me alone mostly. They do knock occasionally to see if I'm okay." Another person told us, "Oh yes, I can spend time on my own. If I'm feeling a bit down, the staff put me on two-hour watch. I'm well treated here." A relative said, "[My relative] likes the quiet lounge and it affords privacy as not too many people use it. [My relative] is treated respectfully by the staff."

The service continued to enable people and their representatives to be involved in the process of planning their care and in making decisions about their care. People told us they were involved in their care planning. One said, "I got asked about it, we talked it through. I said it all looked okay and then every year they want to go through it again." A relative told us, "I have told them how pleased and relieved I am for [my relative] to have moved in here. I inputted to [relatives] care plan." Another relative said, "My family member has just been involved in the annual review of [my relative's] care plan." The views of people and their representatives were reflected in the care records.

Is the service responsive?

Our findings

At the last inspection on 4 February 2015 the service was rated good in this key question. At this inspection the service remains good in this key question.

The service continued to offer people personalised care based on their individual preferences. Care records were individualised and were person centred to include detail about people's likes, dislikes, hobbies and interests. Observations and discussions with staff and the registered manager demonstrated that they knew people well and this meant that they could provide people with personalised care.

The service was in the process of making improvements to end of life care planning. The minutes of a residents and relatives meeting in July 2018 demonstrate that this was discussed with people and that people were told the service would be looking at the gold standards framework for end of life care.

People told us that they had opportunities to engage in a good range of activities within the service. On the day of our inspection a singer came to entertain people and we saw this was a popular event which people appeared to enjoy. The service had a member of activities staff who we saw engaging people in activities throughout the day on both a group and one to one basis. The registered manager told us they were currently advertising for another member of activities staff to improve the provision of activities. They also told us about a new scheme they were accessing run by an external company to support people living in care services to participate in activities in the community. People were encouraged to set up their own activities groups, with one person having set up an art class and another person a cookery class. People made positive comments about the activities on offer. One person said, "I like the singer that comes." Another person told us, "[Activities Coordinator] is marvellous. [They are] very good. [Other resident's name] runs a cookery class and I do an art class. We try to keep occupied." Another person commented, "The activities person is very good. I do enjoy the singer. I do like to go out." A relative said, "[Activities coordinator] is very good. They organised afternoon tea on visitor's day and on St Patrick's Day there was Irish stew and Bailey's dessert." One person commented, "I had a birthday party and two staff took me to bingo. It was so lovely, I really enjoyed it."

The service continued to support people and their relatives to make complaints. There was a complaints policy and procedure displayed in a communal area which informed people of how they could complain. We reviewed the contents of two complaints the service had received and saw that these had been investigated and responded to appropriately. People told us they knew how to make a complaint. One person said, "I wouldn't have a problem. I know where to go. I would go to [registered manager]. Another person told us, "Oh yes I'd speak to [registered manager] or my nurse." A relative commented, "I would talk to the Manager."

Is the service well-led?

Our findings

At the last inspection on 4 February 2015 the service was rated good in this key question. At this inspection the service remains good in this key question.

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The service continued to operate effective systems to monitor and assess the quality of the service. A variety of audits were carried out by the service, including dining observations, infection control, medicines and care planning. The provider also carried out a detailed audit covering all areas of service provision. Records demonstrated that where issues were identified action plans were put into place and improvements made. These were followed up and signed off by senior managers.

The service had an action plan in place which demonstrated a commitment to continuous change and improvement. This included improvements to end of life care planning and reflecting more of people's preferences in care records.

People made positive comments about the leadership of the service. One said, "I like [registered manager]. He often chats when he comes round." Another person told us, "[Registered manager] is very good at sorting things out. I see him around, he often says hello." A relative said, "He speaks to everyone and has a good memory for any issues raised or family stuff. I know he pops in at weekends which must be to make sure things are running well."

People and their relatives told us they felt able to raise concerns with the management of the service and were confident that these would be resolved. One person said, "Yes, I would tell them if I wasn't happy. The manager would sort it out I'm sure." A relative told us, "I would have no problem, I would speak up if I needed to."

The service continued to involve and give people opportunities to feedback on the service through surveys and residents meetings. Minutes of meetings demonstrated that people were consulted about things such as meals, the decoration of the service and activities.

Staff were encouraged to feed back their views through meetings and told us that they felt comfortable making suggestions and that the registered manager promoted this. Records of meeting minutes demonstrated that the views of staff were taken into account when decisions were made about service provision.