

Horizon Residential Homes Limited

Knells Country House

Inspection report

The Knells
Houghton
Carlisle
CA6 4JG

Tel: 01228526496

Date of inspection visit:

12 April 2023

19 April 2023

Date of publication:

13 June 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Knells Country House is a residential care home providing accommodation and personal care for up to 24 people. The service provides support to older people, some of whom are living with dementia-related conditions. At the time of our inspection there were 18 people using the service.

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

People and relatives had many positive comments about the caring, welcoming and warm atmosphere in the home. Relatives said the service provided individual and fulfilling lifestyles for people.

People and relatives said it was a safe place to live. Risks to people were now assessed and managed in a safe way. There had been improvements to the way medicines were managed.

There were enough staff to support people. New staff were appropriately vetted before they started to work at the home.

Since the last inspection a new manager had been appointed. They were putting training and development plans in place for each staff member. Relatives commented on how knowledgeable staff were in supporting people.

People were supported with their individual dietary needs and preferences. They described the meals as "very good". The staff team also supported people to access health care services when necessary.

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

People, relatives and staff had confidence in the management of the home. The manager carried out audits to ensure the safe running of the service. Areas for improvement were set out in a development plan.

The provider was committed to continuing improvements at the home including a refurbishment plan with input from people, relatives and staff members.

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 requires improvement (published 9 November 2022). 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

regulations.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 13 September 2022. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions Safe, Effective and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Knells Country House on our website at www.cqc.org.uk.

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?

The service was safe.

Details are in our safe findings below.

Good 

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good 

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good 

Knells Country House

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 and provided a rating for the service under the Health and Social Care Act 2008.

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

The inspection was carried out by an inspector and an Expert by Experience. 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

Knells Country 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. Knells Country 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 not a registered manager in post. A new manager had been in post for 3 months and had submitted an application to register. We are currently assessing this application.

Notice of inspection

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, professionals who work with the service and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used 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 2 people and a visitor and observed the support people received. We contacted 9 relatives for their views. We spoke with 7 staff including the manager, senior care staff, the cook, housekeeping and maintenance staff and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records including 5 people's care records and multiple medicines records. We looked at 3 staff files for recruitment checks and records relating to the management 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 we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At the last inspection the provider's systems for assessing risk to people's well-being was not effective. This contributed to a breach of regulation 17 (Good governance) 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 17.

- The manager made sure potential risks to people were assessed and managed. There were now risk assessments in place with clear strategies to show how specific risks to individual people would be mitigated.
- Risk assessments were reviewed monthly or when people's needs changed. Staff were knowledgeable about people's needs including any areas of risk.
- Health and safety checks and maintenance services were up to date. It was not always clear from fire records that all staff had taken part in required fire drills. The provider assured us this would be addressed and records would be kept up to date.

Systems and processes to safeguard people from the risk of abuse; learning lessons when things go wrong

- The provider had systems in place to protect the people who lived at the home. The manager and staff understood their responsibility to safeguard people. Any concerns had been reported to the safeguarding authority.
- Relatives said people were safe at the service. A relative told us, "They really take care of everything to make sure [Name] is safe."
- Systems were in place to learn from accidents and incidents. The manager analysed trends in incidents, such as falls, and lessons were learnt to help reduce them recurring.

Staffing and recruitment

- The provider ensured there were sufficient staff on duty to provide the support people needed.
- Relatives commented there had been several changes to the staff team but said it had become more stable now. Relatives said staff spent more time with people and there was always a staff member in the lounge to support people.
- The manager used safe recruitment practices to check new staff were suitable to work with people. There were records of any temporary agency staff used. Agency staff completed a safety induction before carrying out any shifts at the home.

Using medicines safely

- Medicines were managed safely.
- People's medicines were securely stored and administered by staff who had training in medicine management.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- 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.
- The provider facilitated visiting by relatives in line with government guidance.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people's outcomes were good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

At the last inspection the provider's systems for monitoring whether staff had completed sufficient training was not effective. This contributed to a breach of regulation 17 (Good governance) 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 17.

- The provider had a training plan to ensure staff completed essential training.
- Relatives said there were improvements to staff training. Their comments included, "They certainly have the skillset to deal with [my parent's] dementia" and "They seem to be training the new staff so they know what to do."
- The manager was setting up a system of supervision and performance development plans for each staff member to support them in their role and career progression.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Each person's needs were assessed before they came to the service to make sure the right care could be provided.
- Relatives said the assessment process was thorough and included any risks as well as the person's preferred lifestyle. Their comments included, "The manager came out and did a full risk assessment and asked so many questions about [my parent]" and "They seem very good at identifying the specific needs of each individual."

Supporting people to eat and drink enough to maintain a balanced diet

- The staff team worked together to make sure people's nutritional needs were met. The cook was knowledgeable about people's individual dietary needs and provided specialist meals where needed.
- People and relatives made positive comments about the quality of meals. Relatives told us, "The food is excellent and smells gorgeous when I go at mealtimes" and "They get a choice of dishes and [parent] has a glass of wine with dinner."
- People were supported with their hydration and there were jugs of juice and glasses in every room and around the home. Care plans described how to support people with drinks but were not always clear about what actions staff would take if people did not drink enough. The manager addressed this immediately.

Staff working with other agencies to provide consistent, effective, timely care; supporting people to live healthier lives, access healthcare services and support

- Staff worked collaboratively with other care professionals and supported people to access health services, when necessary.
- Relatives were complimentary about the support people received. One relative described how staff had "worked hard" with visiting nursing services to alleviate their family member's health problems.
- A health care professional had positive views of working with the managers and staff team. They told us, "They genuinely care for the residents and share with us any ideas for improvements" and "They are keen to take on advice and suggestions."

Adapting service, design, decoration to meet people's needs

- The home was an older building that had been adapted where possible to support people's needs. There was hoist equipment and an assisted bath to support people with mobility needs. The provider and manager had plans to upgrade the premises.
- Relatives stated adaptations were made to support people's changing needs where this was practicable. For example, one relative told us, "[My parent] now has to be hoisted, but it became apparent that their room was too small and it was getting unsafe for both them and the staff so they moved [person] to a bigger room and arranged a new hoist and sling."

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA and whether appropriate legal authorisations were in place when needed to deprive a person of their liberty.

- Staff were working within the principles of the MCA.
- Staff sought permission before carrying out any personal care. Staff gave people choices and respected their decisions. Where people lacked capacity for any specific decisions, these were made in the person's best interests and included relevant representatives.
- DoLS were applied for appropriately and applications were regularly reviewed for progress.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At the last inspection we found the provider's governance systems were not always effective and actions were not always completed to ensure improvement. This contributed to a breach of regulation 17 (Good Governance) 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 17.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider had strengthened the management team since the last inspection. The new manager had improved the effectiveness of governance systems and the stability of the staff team.
- The manager carried out audits and identified areas for improvement. The provider and manager had a development plan with planned timescales for addressing areas for action.
- People and relatives had more confidence in the way the service was run. They told us, "The new manager seems very transparent in his aims for the home" and "I think the place is running well at the moment, it certainly seems more settled now."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The provider and staff team promoted a positive, person-centred culture.
- People and relatives made many complimentary comments about the individual lifestyle outcomes for each person. They described trips out, activities and garden parties that people enjoyed.
- Care professionals commented that the atmosphere was 'welcoming and friendly' with good care outcomes for people.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; how the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider was aware of the duty of candour and their legal responsibility to be open and honest. Relatives felt the provider and manager were approachable and transparent.
- People and relatives said although there had been no resident/relatives' meetings during the pandemic, they were invited to give their views. They commented, "They keep us up to speed with any changes" and "If I needed to speak about anything I would just call them."

- Staff meetings were held to discuss standards of care. Staff said they felt included in discussions about changes at the home and their views were respected.

Working in partnership with others; continuous learning and improving care

- The staff worked in collaboration with other health and social care professionals. A care professional told us they had a good working relationship with the staff team who welcomed their advice. They commented, "[The service has] approachable management and staff and they continually seek to improve."
- The home had good links with the local community, including a local school, church and community groups.
- The provider was committed to improving the service for the people who lived there. For example, plans were being developed to upgrade the building with the input of people, relatives and staff.