

Kents Hill Care Limited

# Kents Hill Care Home

## Inspection report

50 Tunbridge Grove  
Kents Hill  
Milton Keynes  
Buckinghamshire  
MK7 6JD

Tel: 01908355900

Website: [www.kentshillcarehome.co.uk](http://www.kentshillcarehome.co.uk)

Date of inspection visit:  
15 June 2016

Date of publication:  
12 July 2016

## Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Requires Improvement** ●

Is the service caring?

**Requires Improvement** ●



# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of this service on 10 February 2016, during which breaches of legal requirements were found. We found that people's medication was not always managed and fully documented and did not demonstrate that people's medication was safely administered. We also found that responses to people's individual call-bells were not always fast enough, which meant they did not always receive the care and support they required.

We asked the provider to submit an action plan to tell us how they would meet these regulations in the future; they stated that they would be meeting them by 31 May 2016. During this inspection we returned to see if the service had made the improvements they stated in their action plan. We found that the provider was now meeting these regulations.

We undertook this focused inspection on 15 June 2016 to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Kents Hill Care Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Kents Hill Care Home is based in a residential area of Milton Keynes and provides nursing and personal care for older people, who may be living with dementia. The service is registered to provide care for up to 75 people, on the day of our inspection there were 60 people living there.

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.

Improvements had been made to the systems for medication management and documentation. The registered manager had made sure that people's medication records had photographs and information to guide staff. In addition, they had implemented checks and audits to monitor the administration of medication and identify areas for improvement.

The provider had also made improvements regarding response times to people's call-bells. There had been changes made to staff deployment within the service and the system for when staff took their breaks to help ensure busy times were covered by staff. Audits were carried out to review staff responses to call-bells, to ensure people's needs were met in a timely manner.



## 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 not consistently safe.

There had been improvements to the way that medication administration was managed and documented by the service.

We could not improve the rating for safe from requires improvement, because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

**Requires Improvement** ●

### Is the service caring?

The service was not consistently caring.

Improvements had been made to call-bell response times. The registered manager had implemented systems to ensure call-bells were responded to quickly, as well as audits to monitor the response to them.

We could not improve the rating for caring from requires improvement, because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

**Requires Improvement** ●



# Kents Hill Care Home

## 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 an unannounced focused inspection of Kents Hill Care Home on 15 June 2016. This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our 10 February 2016 comprehensive inspection had been made. We inspected the service against two of the five questions we ask about services: Is the service safe and caring. This is because the service was not meeting some legal requirements within these questions.

The inspection team comprised of one inspector.

Before this inspection we reviewed all the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are information about important events which the provider is required to send us by law. We spoke with the local authority to gain their feedback as to the care that people received. We also reviewed the report from our previous inspection.

During the inspection we spoke with the registered manager and deputy manager about the improvements they had implemented following our previous inspection. We also spoke with eight people living at the service, a team leader and a carer, to get their views on the service.

In addition we reviewed documentation held at the service, to corroborate our findings. This included medication records for 15 people living at the service and documentation relating to the management of the service.



# Is the service safe?

## Our findings

During our inspection on 10 February 2016, we found that people's medication was not always well managed at the service. People received their medication on time; however the systems in place for managing and recording medication administration were not always completed fully. This was a breach of regulation 12 (2)(g) of the Health and Social Care Act 2005 (Regulated Activities) Regulations 2014.

During this inspection we found that improvements had been made by the provider. The registered manager told us that they had carried out a full audit of medication records within the service, including people's individual Medication Administration Records (MAR) charts. These were forms used by staff to identify which medication people needed at different times throughout the day. Staff also used these to sign to say people had received their medication or to record if it was refused for any reason.

People told us that they were happy with the way medication was given to them. They explained that staff always explained what they were taking and made sure they were relaxed and comfortable when they took it. One person told us, "My medicines are well managed, I find it alright!" Another said, "I think they are very good here. My medication has been sorted, no complaints."

Staff members told us that the registered manager had discussed the issues around medication identified during our previous inspection. They told us that they had spoken about the areas for improvement and had set out a plan to show staff how they would manage these improvements. Staff told us that this included the introduction of regular medication audits to check records and improvements to people's documentation, such as adding photographs to each person's profile page in the MAR folder. Staff told us that they felt this helped to reduce the chance of errors and that any missed signatures were quickly identified and resolved, thanks to the new audits. One staff member told us, "We know that we definitely have the right information now and there are less gaps."

The registered manager confirmed that they had increased the amount of medication checks being carried out at the service. They showed us that they carried out weekly checks of all medication administration on the residential floor, as well as monthly checks in the nurse-led areas of the service. These audits highlighted where errors were identified and actions were taken to rectify them. The registered manager explained that staff were spoken to regarding errors and further action such as competency assessments and re-training were carried out if necessary.

We saw that audits were being completed regularly and that action was taken when gaps or errors were identified. We also saw that improvements had been made to people's medication records, including photographs on medication profile sheets, which had helped improve medication administration at the service. The provider had made improvements to the systems in place at the service for the administration and management of people's medication.



## Is the service caring?

### Our findings

During our inspection on 10 February 2016, we found that people's call-bells were not always answered in a timely fashion, causing them to wait for prolonged periods of time before receiving care. This meant that the care and treatment that people received did not always meet their needs which was a breach of regulation 9 (1) (3)(b) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

During this inspection we noted that the provider had made improvements to call-bell response times, as well as the oversight of these. The registered manager told us that they had spoken with the staff about responding to call-bells promptly, to ensure that people's needs were met and that they were reassured that they would be supported by staff when needed. They also told us that they had implemented systems to track call-bells and the time taken to respond to them. They also told us they had reviewed staffing distribution and break times, particularly at busy times of day, to help ensure there was enough staff available to meet people's needs.

People told us that staff were always available to them if they needed them. They also said that they felt staff responded to their call-bells quickly if they needed to pull them. One person told us, "No we don't have to wait long to see staff." Another person said, "Yes they are good, if you call the bell they are usually there quickly." None of the people we spoke to had concerns in this area and told us that they were always seen in less than five minutes if they rang their call-bells.

Staff members told us that the changes that had been introduced by the registered manager had been effective in improving responses to call times. They explained that they had stressed the importance of responding to call bells promptly during staff meetings and that changes to staffing deployment had helped to ensure call-bells could be responded to in a timely manner. One staff member told us, "Breaks have changed, they are shorter and more staggered, which helps when answering call-bells. The home is definitely improving."

The registered manager showed us that they were carrying out audits of all call-bell responses. They explained that at the moment these were done manually as the system at the service did not provide an automatic function for this; however the provider was getting quotes to upgrade the system, to allow it to do this. We saw that the audit recorded the duration that call-bells were ringing for and showed that all those recorded since March 2016 had been answered within five minutes. We also saw that call-bell responses and staff breaks had been discussed in staff meetings and that the shortening of breaks had been done in consultation with members of staff, to ensure they were happy with the new arrangements.

The provider had implemented systems and checks to ensure that people's call-bells were answered quickly, which helped to make sure that people received the care and support they needed, when they needed it.