

Mr Mukesh Patel

Kenroyal Nursing Home

Inspection report

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Ratings

Is the service safe?

Good



Overall summary

Kenroyal Nursing Home is registered to provide accommodation and support for 64 people who require nursing or personal care, ranging from frail elderly, dementia care and nursing needs. On the day of our visit, there were 64 people living in the home.

The inspection was unannounced and took place on 4 June 2015.

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.

Prior to this inspection we received some information of concern which indicated that not all accidents and incidents were reported as a safeguarding matter when appropriate. During this inspection we found that the registered manager maintained a record of all accidents and incidents that took place and overviewed them to ensure that they should not be reported as a safeguarding.

Staff had an understanding of abuse and the safeguarding procedures that should be followed to report potential abuse. Systems in place had been followed and appropriate action taken to keep people safe, minimising any risks to health and safety.

People told us they felt safe and secure living in the service. Staff told us that they worked hard to keep people safe.

Risk assessments within people's care records were completed appropriately and reviewed regularly to ensure they remained reflective of people's current needs. Staff knew how to manage risks to promote people's safety, and balanced these against people's rights to take risks.

Staff were not allowed to commence employment until robust checks had taken place in order to establish that they were safe to work with people.

There were adequate numbers of staff on duty to support people safely.

Summary of findings

Medicines were managed safely and the systems and processes in place ensured that the administration, storage, disposal and handling of medicines were suitable for people.

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?

This service was safe.

People were safe because the provider had systems in place to make sure they were protected from abuse and avoidable harm. Staff received on-going safeguarding training, and were aware of the reporting process so that any concerns were escalated.

There were risk management plans in place to promote and protect people's safety.

The service followed robust procedures to recruit staff safely.

There were sufficient numbers of staff to meet people's needs.

Systems and processes in place for the administration and recording of medicines were appropriate.

Good



Kenroyal Nursing 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 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 inspection took place on 4 June and was unannounced. The inspection was undertaken by one inspector.

We checked the information we held about the service and the provider. We reviewed the recent concerns that had

been raised and found that we had received information about events that the provider was required to inform us about by law, for example, incidents of serious injuries or events that stop the service.

During our inspection, we observed how the staff interacted with the people who used the service and how people were supported during individual tasks and activities.

We spoke with three people who used the service, and one relative. We also spoke with the registered manager, two registered nurses and one carer.

We looked at ten people's care records to see if their records were accurate and up to date. We looked at four staff recruitment files and further records relating to the management of the service including quality audits.

Is the service safe?

Our findings

Prior to this inspection we received information of concern which indicated that not all accidents and incidents were reported as a safeguarding matter when appropriate or in accordance with statutory regulations.

During this inspection, staff told us that they reported any accidents and incidents, and completed the appropriate paperwork. One staff member said, “We know it is important to monitor people for any changes, bruising and so on. If we see something we keep body maps and an accident form is filled in.” The registered manager showed us the accident reporting records, which had all been completed correctly. She explained that she would review them for any trends to determine if an action plan was required to try and reduce the risks of the same thing happening in the future. We discussed that this information was also used to enhance staff learning and develop future practice.

People told us that they felt safe and knew who to speak with if they had any concerns about their safety. One person said, “Oh yes, I can tell you I really do feel safe here.” Another person told us, “They give me the care I need and that keeps me safe.” Relatives told us that their family members felt secure in the service and would be able to speak with staff if they had a problem.

Staff told us that if they suspected neglect or abuse, they would report it to the nurse or the registered manager. All of the staff we spoke with could explain how they would recognise and report abuse and said they would ensure that all concerns were acted on. A nurse said, “I would expect that carers would inform the nursing staff. We would then review things and tell the manager.” The provider had effective procedures for ensuring that any concerns about people’s safety a person or a person’s safety were appropriately reported.

The registered manager told us that all staff had received safeguarding training and showed us the formal policies and procedures in place to support this process. We were told that if a safeguarding issue arose, that this would be discussed with the staff so that they could learn lessons and try and prevent similar incidents from occurring again. The registered manager told us that it was important that staff communicated effectively with each other and people and their relatives, when issues took place so that everyone

understood the actions that had been taken in investigating concerns. Appropriate steps had been taken to identify abuse and reduce the risk of this from occurring within the home.

One person told us, “I know they monitor me to keep me safe.” This person was referring to the risk assessments they had in place. Staff told us that risks to people’s safety were reviewed and evaluated on a regular basis. We found that these included risks associated with malnutrition, pressure damage, manual handling and falls. We found that risk assessments were discussed with people and their relatives, and guided staff to manage identifiable risks to individuals. Individual risk assessments had been completed for people and we saw they had been updated on a regular basis.

The registered manager told us that individual evacuation plans were in place for people using the service. We reviewed people’s individual evacuation plans and found that they detailed specific needs to ensure people’s safety. There were also plans in place to deal with any foreseeable emergencies which may affect the running of the service. It was evident that these processes were in place to minimise the risks to people’s and staff safety.

People told us that there was enough staff on duty to keep them safe. One person said, “There are plenty of them.” We were also told, “They are always there to help, there seem to be a lot of staff about on most days.” Staff told us that there were enough of them to attend to people’s needs in a safe and timely manner. One nurse told us, “We work long shifts but we don’t use agency staff, we cover shifts when needed because it is better for the people living here.” The registered manager told us that she considered it was important that staff were constant; this benefitted people and ensured they received better care. Our observations confirmed that there was sufficient staff on duty, with appropriate skills to meet the needs of people, based upon their assessed dependency levels.

The registered manager told us that relevant checks were completed before staff worked unsupervised at the home; these included employment references and Disclosure and Barring Service (DBS) checks to ensure staff were of good character. The recruitment records that we saw confirmed this and we found that files contained appropriate information. Appropriate checks were carried out before new staff commenced work. The service followed safe recruitment practices.

Is the service safe?

People were supported by staff to take their medicines safely and in a way that was right for them. One person said, “They always give me my tablets when I need them.” Staff told us that they had received medication training and worked hard to ensure that medication errors did not occur. We found that medicines were stored securely in trolleys in a locked store room. Medication fridges were checked to ensure they were kept at an appropriate temperature. Medication trolleys also had a thermometer inside them to ensure the medication was stored at an appropriate temperature, so that its efficacy was maintained. We observed staff administering medication and found that this was carried out correctly.

We looked at ten Medicine Administration Records (MAR) and saw that they were completed correctly. Records were

in place to instruct staff in what circumstance medicine prescribed as ‘when required’ should be given. This prevented people being given medicine when it was not needed.

Staff told us that medication was monitored and audited on a weekly basis. We saw that medicines were checked to ensure that staff were managing them safely. The registered manager carried out checks of the medicines on a weekly basis to ensure that stocks remained correct. When new cycles of medication entered the home these were detailed on the MAR chart. The registered manager informed us that they intended to make the audit system more robust and was working on a new template for the audit system. It was evident that medicines were managed in a safe manner.