

Kirknowe Nursing Home Care Home Service

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Wishaw
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Telephone: 01698 360 557

Type of inspection:
Unannounced

Completed on:
29 August 2023

Service provided by:
HC-One No. 1 Limited

Service provider number:
SP2016012770

Service no:
CS2016349819

About the service

Kirknowe Care Home is owned and managed by HC-One providing accommodation for up to 90 people. All bedrooms are single, with partial ensuite facilities. The spacious grounds are well maintained and provide safe, enclosed areas for people to enjoy.

There is a sizeable car park and the home is easily accessible by public transport and close to local amenities.

The service registered with the Care Inspectorate on 23 November 2017.

On the date of the inspection there were 87 people living in the home.

About the inspection

This was an unannounced inspection which took place between 23 and 29 August 2023. The inspection was carried out by one inspector from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, information submitted by the service, and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with several people using the service and five of their relatives
- spoke with a number staff and an outside health professional and the management team
- reviewed documents
- observed practice and daily life for residents and staff.

Key messages

- People were very happy with the care and support they received in the service.
- Relatives were very happy with the quality of care and communication from the home.
- Some daily health monitoring tools could have been better completed.
- There were some very good activities taking place regularly that people enjoyed.
- The service could further improve quality of care through consultation with staff and consideration of people's needs in establishing staffing levels and skills mix.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

Our overall evaluation for this key question was very good. We found the service had significant strengths in keeping people safe, and meeting their needs.

Throughout the inspection visits we could see people were treated with dignity and respect. We saw caring interactions between staff during our visits to each of the units within the home. Staff clearly knew the residents well and understood how best to support them. We carried out a more formal observation in one unit and noted similar caring and supportive interactions. People appeared well kept, comfortable, and engaged well with the care and other staff within the home. Staff we spoke to felt happy in their work and spoke highly of the support they had received from the management. They told us people were cared for to a high standard within the home.

There was a good range of communal activities that took place regularly. The home had recently carried out an 'activity challenge' where a large number of activities were offered across the home and people's enjoyment and willingness to engage with each activity was recorded. This went down well with the residents and meant they could sample activities themselves. Those that were popular and people most enjoyed would continue. During the inspection a '3 o'clock stop' activity was taking place where all staff would stop what they were doing at 3 o'clock and socialise with residents. We encouraged the home to carry out these activity 'taster sessions' on an ongoing basis to ensure activities adapted to a changing profile of residents.

People in the home were receiving regular visits from their loved ones. Relatives told us they could see their loved ones when they wanted and they received regular communications and updates from the care home staff. This was positive for people's wellbeing and ensured regular contact with family members. Families spoke positively about the very good quality of care their loved ones received in the home.

Comments included:

"They look after my [relative] so well."

"Staff are lovely and attentive."

"Staff are outstanding."

"My [relative] is happy and home provides for her every need."

We noted that there continued to be a few inconsistencies with some care recordings. Although we were satisfied people were receiving the care they needed, we could see a few gaps in oral care recordings completed by staff. These recordings though had significantly improved since our previous inspection visit. It was evident that when staff noticed any issues or had concerns about people's oral care these were raised with the oral health team, however, this could have been better recorded. We encouraged the management team to ensure staff completed these records through carrying out some further monitoring of completed records.

Every person living at Kirknowe Care Home had a personal plan that detailed their care needs. These were updated frequently and available to all appropriate staff and visiting professionals. It was noted that the entries in the support plans and associated documentation sampled were detailed and descriptive and gave an accurate reflection of people's care needs.

Residents and their relatives took part in six-monthly review meetings to ensure their needs were being appropriately met. It was noted only a couple of reviews had gone beyond the six-month period set out in legislation due to relatives' absence. The need to ensure these took place as stipulated was impressed upon the service management team even if, where people were absent, the review attendance was revised. These reviews should then be carried out timeously and maybe revisited with absentees at a later date, so that this legal requirement is met at all times.

How good is our leadership?

5 - Very Good

We found significant strengths in aspects of the care provided which led to high quality, positive outcomes for people, therefore, we evaluated this key question as very good.

The service management team monitored service provision through an established audit system, unit staff support meetings and wider team and clinical meetings. We sampled some associated audit records and could see they had been carried out to a high standard. It was, however, noted that the related action plans produced with regard to care plan quality could have been more descriptive, and should have assigned improvement actions to specified individuals with targeted completion dates, to ensure the issues identified were timeously addressed. This would further evidence effective monitoring in keeping people well.

Amongst the comprehensive auditing processes that we sampled, the home also carried out 'person of the day' monitoring. This meant that outwith the normal care provision and evaluation processes in the home, each resident individually became the focus for one day. Their care and support was subject to a full set of checks being carried out on their care plans, medicines, weights, room condition, and their opinion of the quality of care sought. This ensured all aspects of people's care was regularly considered and gave the opportunity for people to voice their opinions and be involved in the quality assurance processes in the home.

Staff we spoke to told us how well they were supported by an approachable, supportive, very good management team. Examples were given which demonstrated the caring and considerate approach the management and the wider team had taken towards each other. The only issue that was raised by a few staff were, that during the working day there could be pinch points where the addition of another staff member could be beneficial in providing high quality care. This included an extra staff member during the nightshift. Staff made it clear that although these pinch points were there, this did not impact on people's safety and was not to the detriment of meeting people's care needs. However, in providing high quality care it is important that clinical, environmental, and practical considerations are taken into account in establishing the relevant staffing levels and mix of skills across units supporting people with complex needs. (See area for improvement 1)

Areas for improvement

1. To provide high quality care, the service should, in consultation with relevant staff, consider and regularly review staffing levels across all units day and night to ensure people's needs can be met.

This is to ensure that care and support is consistent with Health and Social Care Standard (HSCS) which state that:

'My needs are met by the right number of people' (HSCS 3.15); and

'People have time to support and care for me and speak to me' (HSCS 3.16).

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

To enhance and improve the current activities provision in the service, the provider should ensure that each person's individual wishes, preferences, and friendships are considered in activities assessment and included in the service activities provision.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) 1.19 which states:

'My care and support meets my needs and is right for me' and 1.25 which states:

'I can choose to have an active life and participate in a range of recreational, social, creative, physical and learning activities every day, both indoors and outdoors.'

This area for improvement was made on 11 February 2022.

Action taken since then

There was a wide range of activities being offered to residents and we could see they were involved in discussions around them. Staff had utilised the knowledge they had of people and their own ideas in forming some of the activity that we could see had taken place. The home used the knowledge of how people had engaged in, and enjoyed the activities to help determine future plans.

This area for improvement had been met.

Previous area for improvement 2

To ensure people's needs are being met and evidenced properly, the provider should ensure all records are accurately and consistently completed. This should include, but not be limited to ensuring that:

- a) oral health, topical medication, 'as required' medication reasons/effectiveness and wound care plans are consistently and accurately completed; and

b) a system of random checks to ensure all supports have been carried out appropriately.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) 1.19 which states:

'My care and support meets my needs and is right for me.'

This area for improvement was made on 11 February 2022.

Action taken since then

Daily records were completed well and it was evident that where people had wounds, these were being dressed appropriately, and there was evidence of wounds healing well. Some gaps were still evident in a few oral care records but these had improved significantly since the previous inspection. We asked the senior management team to regularly sample these records themselves going forward, to ensure accurate completion. The electronic medication recording system had checks and measures built in to ensure 'as required' medications were administered properly recording reasons and effectiveness.

This area for improvement had been met.

Previous area for improvement 3

To ensure the environment in the service is safe, clean, and free from odours, the provider should ensure that all areas are properly cleaned and that bedding is regularly refreshed.

This is to ensure care and support is consistent with Health and Social Care Standards (HSCS) 5.22 which states:

'I experience an environment that well looked after with clean, tidy and well maintained premises, furnishings and equipment' and 5.18 which states:

'My environment is relaxed, welcoming and peaceful and free from avoidable and intrusive noise and smells.'

This area for improvement was made on 11 February 2022.

Action taken since then

We carried out an environmental walkaround with the manager and the home appeared clean and tidy and subject to a regular cleaning regime. A sample of mattresses and bedding were checked randomly in each unit and these were also clean with no significant stains or poor odours.

This area for improvement had been met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good

How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good
2.4 Staff are led well	5 - Very Good

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