

Keate House Residential Home Limited

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Inspection report

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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?	Outstanding ☆
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Keate House is a residential care home providing personal care to 46 people aged 65 and over at the time of the inspection. The service can support up to 48 people across two separate wings, each of which has separate adapted facilities. One of the wings specialises in providing care to people living with dementia.

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

Keates house was exceptionally responsive. Activities were thoughtfully planned centred on people's interests which enabled people to relive past experiences and positive memories. Staff promoted strong links with the community to achieve this. The communication needs of people were also carefully considered and the provider has developed innovative methods of sharing and recording information about the service and people's experiences.

Everybody we spoke with and gave exceptionally positive feedback about Keate House and the kindness and compassion that staff showed people. One person described staff as, "caring," "capable," "friendly" and "comforting," adding, "I don't think I could be in a better care home." People felt listened to and the personalised support provided had a significantly positive impact on their wellbeing.

People were highly complementary about the registered manager and how the service was led. People described the service as, "fun," "organised," and "first class." The management team had good oversight of the service and had developed tools to help track the quality of the care and support, so they could improve it. People felt listened to and effective systems were in place to engage with people and encourage people to share their views.

Systems were in place to ensure the safety and wellbeing of people. Care plans and risk assessments were regularly reviewed, and people received their medicines safely.

People were supported to have maximum choice and control of their lives and staff supported in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. People were offered choices and involved in decision making relating their care.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 13 August 2015). There was also an inspection on 09 March 2018 however, the report following that inspection was withdrawn as there was an issue with some of the information that we gathered.

Why we inspected

This is a planned re-inspection because of the issue highlighted above.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was exceptionally responsive.

Details are in our responsive findings below.

Outstanding ☆

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

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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 Care Act 2014.

Inspection team

This 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

Keate House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information

helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with nine people who used the service, three relatives and two visiting professionals about their experience of the care provided. We spoke with ten members of staff including the registered manager, business manager, activity coordinator, office manager, senior care workers, care workers and the chef. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included six people's care records and multiple medication records. We looked at four staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at Keate House. One person said, "The [staff] are very caring, and I know I am safer here than I am at home."
- Staff had completed safeguarding training and were aware of how to raise concerns. Referrals had been made appropriately to the local safeguarding team.
- A whistleblowing policy was in place and staff were aware of the procedures to follow.

Assessing risk, safety monitoring and management

- Risks to people had been assessed and measures were in place to reduce identified risk. This information was clearly recorded within people's care files. Staff confirmed they had access to key policies and procedures.
- One relative praised the service for managing risks well and told us, "The secret is in the fact that staff know the residents individually and know exactly what to do."
- Regular safety checks were made on the building, utilities and equipment.

Staffing and recruitment

- Staff were safely recruited, and all necessary checks were completed before starting work at Keate House.
- People told us there were enough staff to meet their needs in a timely way. One told us, "It seems like there is always somebody about to provide help and assistance when required." One relative also told us, "Whenever I visit, there always seems to be a whole bunch of staff around."
- We also observed staff were always visible and available to support people during our inspection.

Using medicines safely

- Medicines were stored securely and only administered by senior care workers who had been trained and assessed as competent. One resident described staff as, "Very professional," and added, "[Staff] won't leave you until they see you taking your medicine."
- Records of administration were well maintained, in line with best practice and completed comprehensively.

Preventing and controlling infection

- Keate House had systems in place to reduce the risk of infection. Staff had access to personal protective equipment such as gloves and aprons and received training in infection control.
- People told us staff kept their bedrooms clean and tidy. One person told us, "I like my room, it is spacious, spotless and well maintained."

Learning lessons when things go wrong

- A system was in place to record accidents and incidents. They were reviewed regularly by the registered manager and the business manager to look for any trends and identify whether future incidents could be prevented.
- One person described how measures were put in place following a fall to make sure they were kept safe. They told us, "I did slip once in my bedroom and hurt my shoulder, but the carers were very quick to help me, and I now have a safety floor mat in place."

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs were assessed prior to moving into Keate House and care plans had been developed based on these assessments, as well as assessments provided by other health and social care professionals.

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 Act 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 any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- During the inspection we observed staff asking people for consent before they delivered care and staff were able to describe the importance of why they did this. We also saw that people had given their written consent to care where they were able.
- Where a person was unable to consent to their care, the registered manager had ensured their capacity had been assessed and care was only delivered in the person's best interests. Where needed, authorisation under the DoLS process had been sought and we saw conditions were being met.

Staff support: induction, training, skills and experience

- Staff received the training they needed to do their job well and received a robust induction when they started working at Keate House. People also told us they felt staff were well trained. One person told us, "Of course the staff are competent, no worries on that score."
- Staff felt well supported. They had received regular supervisions and appraisals and told us they felt able to raise any issues they had with the registered manager.

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

- People's nutritional and hydration needs had been assessed and were being met. Staff were aware of

people's needs and preferences in relation to meals and drinks and this was reflected within care plans.

- People spoke positively about the food on offer and the support they received. One person told us, "The meals are fantastic with choices always available, and I am pleased that I am never rushed." One relative also told us, "The food looks nice and is well presented. The family appreciates the fact that if [name] falls asleep, then [staff] gently rouse her and assist her to eat."
- We observed staff supporting people to eat and drink throughout the inspection and there were facilities for people and relatives to help themselves to drinks throughout the day. We saw people being offered choice, supported to eat and drink at their own pace with appropriate equipment that helped people remain as independent as possible.

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

- People confirmed they had access to healthcare services and support. One person told us, "Things seem to be well organised here and you will always be able to see the doctor if you need to."
- People's care records showed that referrals were made to other health professionals in a timely way when their specialist advice was required. Advice provided by these professionals was incorporated within people's care plans. One relative told us, "Quite simply, [name] now needs a lot of help and support. The carers have helped her to bounce back so well from her recent [illness]."
- Staff worked closely with a number of agencies to ensure people's needs were being met, including GP's, and community health teams. One visiting professional told us, "Staff always take on board advice, and they know the residents really well. They are really good."

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

- People had the equipment they needed to be supported effectively and the provider had considered appropriate signage to help people find their way around. Keate House also had a 'Treasured Memory Centre'. This was a communal dayroom which had been carefully designed with mood lighting to create a calm and relaxed atmosphere.
- People were encouraged to personalise their rooms with photographs and small personal items.
- A lift was available to help people reach all floors of the home. This included access to the lower floor which had a number of facilities for people to enjoy including a cinema room, tuck shop and beauty room.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- We observed many interactions between staff and people living in Keate House throughout the inspection which showed staff knew people well and how to respond to people's needs in a respectful and caring way. We observed one person who showed signs of confusion and distress. A staff member immediately responded and offered reassurance which helped the person become more relaxed.
- Everybody we spoke to spoke positively about the care people received. One person told us, "Its lovely, I couldn't be in a nicer place."
- Staff were committed to provide a high standard of care and relatives and visiting professionals spoke positively of the caring approach of staff. One relative told us, "I live a long way away, but I am always made to feel very welcome whenever I arrive." One visiting professional told us, "The home is very welcoming and there is a very relaxed atmosphere. There always seem a lot a of staff around and [it has] a lovely peaceful environment."
- People's diverse needs were known and respected, including any characteristics under the Equality Act 2010. The registered manager told us of plans to develop a multi-faith room and explained they had explored how they promoted an inclusive environment by displaying posters and making literature available to encourage people to feel more comfortable discussing their sexuality needs.

Supporting people to express their views and be involved in making decisions about their care

- Care records showed people were involved in the development and review of their care plan.
- People also confirmed they were involved in making decisions about their care. One person told us, "I am always consulted around my care needs and [staff] are also good at involving my family".

Respecting and promoting people's privacy, dignity and independence

- We observed people being treated with dignity throughout our inspection and people confirmed that staff respected their privacy. One person told us, "I am assisted when I want to have a shower, or a bath and the carers are always respectful," One relative also told us, "[Staff] are so respectful. [Name] can often look to rush out the room half dressed. The staff seem alert to this; and work hard to ensure [name's] dignity is respected."
- Care plans described where people required support and one person told us, "I have certainly been encouraged to be as independent as possible." Another person told us, "In here you get the 'full monty', anything you can't do for yourself [staff] will do for you."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has now improved to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Arrangements for social activities were innovative and met people's individual needs, enabling people to live as full a life as possible. People had access to swimming sessions at the local baths, visiting local cinemas and participating in a wide range of services and groups within the local community.
- In addition to having a dedicated care and activity team, the provider had appointed a lead carer who worked directly with people and families to find out what interests and hobbies people had in the past. This person spoke with pride and enthusiasm about their role, and we were told of many examples where staff had then gone the extra mile to create opportunities for people which enhanced wellbeing and encouraged people to re-live happy memories and experiences. Following each experience, people were encouraged to feedback in a way that was appropriate to them.
- Staff had discovered one person had worked as a secretary in a primary school for many years and arranged a tour around the local school where the person presented the children with gifts for Christmas. Another person had previously been a member of the WRAF and staff arranged a visit and tour of a local aerodrome. The person fed-back following the trip, "The smell brought it all to life."
- Staff had supported a number of people to attend important family celebratory occasions which would have been difficult for people to attend without the support of care staff. One person had recorded, "I had lots of laughing and crying because I was so happy." Another person expressed how they were, "Very proud and honoured to give [their daughter] away" at her wedding.
- Not all experiences included trips out but were equally important to people, and showed how staff went the extra mile to address people's needs and wishes. This was particularly evidenced over the Christmas period. Everyone was given a gift that meant something to them and videos were made where people had consented to capture those moments. A staff member had sourced a gift for one person as they were aware of their love of films. The person was seen to be visibly thrilled at this gesture. People could also invite guests to Christmas dinner and social events over the festive period. In one example. Family members feedback their gratitude for this adding, "Dad said he and mum had a lovely time and a delicious Christmas dinner together."
- The service also took a key role in the local community and was actively involved in building further links. The local church had fed-back to the registered manager following a recent Christmas tree festival where people living in Keate House had made their own decorations, "Your entry brings tears to the eyes of many visitors who comment on your tree."
- Staff paid great attention to the needs and wishes of people living at Keate House and delivered care and support which ensured flexibility and choice. Care plans contained detailed personal histories and people

receiving care and relatives confirmed staff knew them well and listened to them. One visiting professional told us, "The home is lovely, it's really good. The staff are on the ball and know what they are doing."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The provider had taken innovative steps to meet people's communication needs by providing information in a range of accessible formats. The registered manager had introduced visual information for people in bedrooms to reduce the risks of falls. Information about Keate House had also been made into a video which enabled people to learn about the care and facilities offered.
- Where people lived with dementia, staff had encouraged people to capture memories on video, so they were able to watch these at a later date and could share with families. This enabled effective and meaningful conversation with people experiencing memory loss.
- The individual communication needs of people were assessed and care plans contained detailed information about people's communication needs. Relatives confirmed staff understood the communication needs of people and one told us, "My mother's hearing and eyesight are not as good as they were, but the staff are fully aware and are able to suitably adapt."

Improving care quality in response to complaints or concerns

- A complaints policy was in place and information on how to make a complaint was clearly visible.
- People confirmed they knew how to raise a complaint and were confident in doing so. One person told us, "Once I did make a minor complaint and I am pleased to say it was satisfactorily resolved."

End of life care and support

- Staff were responsive to the needs of people receiving care at the end of their life. Key wishes of people were recorded in care plans including when they didn't wish for resuscitation in a medical emergency. These plans were reviewed each month and staff worked closely with the GP to respond to changes in need were required.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The management team in Keate House promoted a positive culture which achieved good outcomes for people. The registered manager described the aim of the service as, "To enable people to live the life they had before, to keep people safe and enable staff to have a good work life balance."
- Without exception, people living in the service felt it was well led. One person told us, "Without question I would recommend this home, it is an amazing place." Relatives were equally complimentary. One relative told us, "This place is a happy environment where people are encouraged to get back to how they were." Another relative told us, "The leadership shown here is just what people need. It has a lovely balance and feel to it."
- Staff were motivated and spoke with pride about working at Keate House. One staff member told us, "Oh its brilliant. I have never worked in a place like it. Everyone has a laugh and I love it here." Another staff member said of the management team, "I think the management are great. That's my honest opinion. They are there if needed. They are all very helpful."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Systems were in place to engage with people and gather their feedback regarding the service. This included gathering feedback through relative and resident meetings, and there was a suggestion box for people's feedback in the communal area. One relative told us, "[Staff] always seem so very pro-active and willing to engage."
- Staff felt valued and felt there was an open and honest culture within the service and felt they were listened to. The provider had a recognition system in place for staff who could be nominated by colleagues, relatives or people living at the home.
- The registered manager ensured relatives were kept updated through newsletters and social media. One relative had emailed the registered manager following receipt of a recent newsletter and said, "It's so lovely to see the residents, but in particular my mum looking so happy and engaged in the activities you offer. It is heartening to see her involved and smiling when I cannot visit on a daily basis." Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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
- There was a robust framework of governance underpinning the service. Audits and other checks completed by the registered manager, the business manager and senior care staff were effective in

identifying and driving improvements.

- The registered manager understood their responsibility for notifying the Care Quality Commission of events that occurred within the service and we saw that accurate records were maintained.

Working in partnership with others

- Keate House had developed effective relationships with other services and local organisations which enabled people to feel they were part of their local community. People living at the service participated in local community events, and community groups and businesses visited people living at Keate House on a regular basis.
- A well-known company spent a day recently at the service talking about their work and assisting with Christmas preparations. Residents spoke positively about the experience and the business fed-back to the provider how much they had learnt about dementia and were proud to have achieved dementia friend status at the end of their visit.