



Making Social Care Better for People

Inspecting for better lives

Key inspection report

Care homes for older people

Name:	Kenton Hall Nursing Home
Address:	Kenton Lane Gosforth Newcastle Upon Tyne NE3 3EE

The quality rating for this care home is:	three star excellent service
--	------------------------------

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full assessment of the service. We call this a 'key' inspection.

Lead inspector:	Date:
Suzanne McKean	2 4 0 4 2 0 0 9

This is a report of an inspection where we looked at how well this care home is meeting the needs of people who use it. There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

Outcome area (for example Choice of home)

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

This is what people staying in this care home experience:

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

Copies of the National Minimum Standards – Care Homes for Older People can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Our duty to regulate social care services is set out in the Care Standards Act 2000.

Reader Information

Document Purpose	Inspection report
Author	CSCI
Audience	General public
Further copies from	0870 240 7535 (telephone order line)
Copyright	Copyright © (2009) Commission for Social Care Inspection (CSCI). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CSCI copyright, with the title and date of publication of the document specified.
Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Kenton Hall Nursing Home
Address:	Kenton Lane Gosforth Newcastle Upon Tyne NE3 3EE
Telephone number:	01912711313
Fax number:	01912145363
Email address:	noemail
Provider web address:	

Name of registered provider(s):	Solehawk Limited
Type of registration:	care home
Number of places registered:	60

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	60
Additional conditions:		
The maximum number of service users who can be accommodated is: 60		
The registered person may provide the following category of service only: Care Home with Nursing, Code N. To service users of the following gender: Either. Whose primary care needs on admission to the home are within the following category: Old age, not falling within any other category, Code OP, maximum number of places 60		

Date of last inspection									
-------------------------	--	--	--	--	--	--	--	--	--

Brief description of the care home
Kenton Hall Care Home provides nursing care for up to 60 older people. The home is purpose built and shares the site with the residential home owned by the same company. The home has two floors, which are accessible by stairs and a passenger lift. Both floors have large separate dining rooms and a range of lounges including a separate smoking room. There is a large conservatory on the ground floor, which leads into a large pleasant garden. There are specialist bathrooms, showers and toilets available on both floors. All of the bedrooms are single and have en-suite facilities. There is easy access for wheelchair users and ample car parking. The home is located within a residential area, close to all local amenities and is accessible by local transport.

Brief description of the care home

The home charges fees of between £383.52 and £555.62 per week depending upon the needs and requirements of the individual residents. The home provides nursing care. The free nursing care element of the funding is provided in addition to the costs charged to the resident and is dependent upon the assessed level of nursing need.

The home provides information about the service through the service user guide. A copy of the last inspection report from The Commission for Social Care Inspection is available in the entrance to the home.

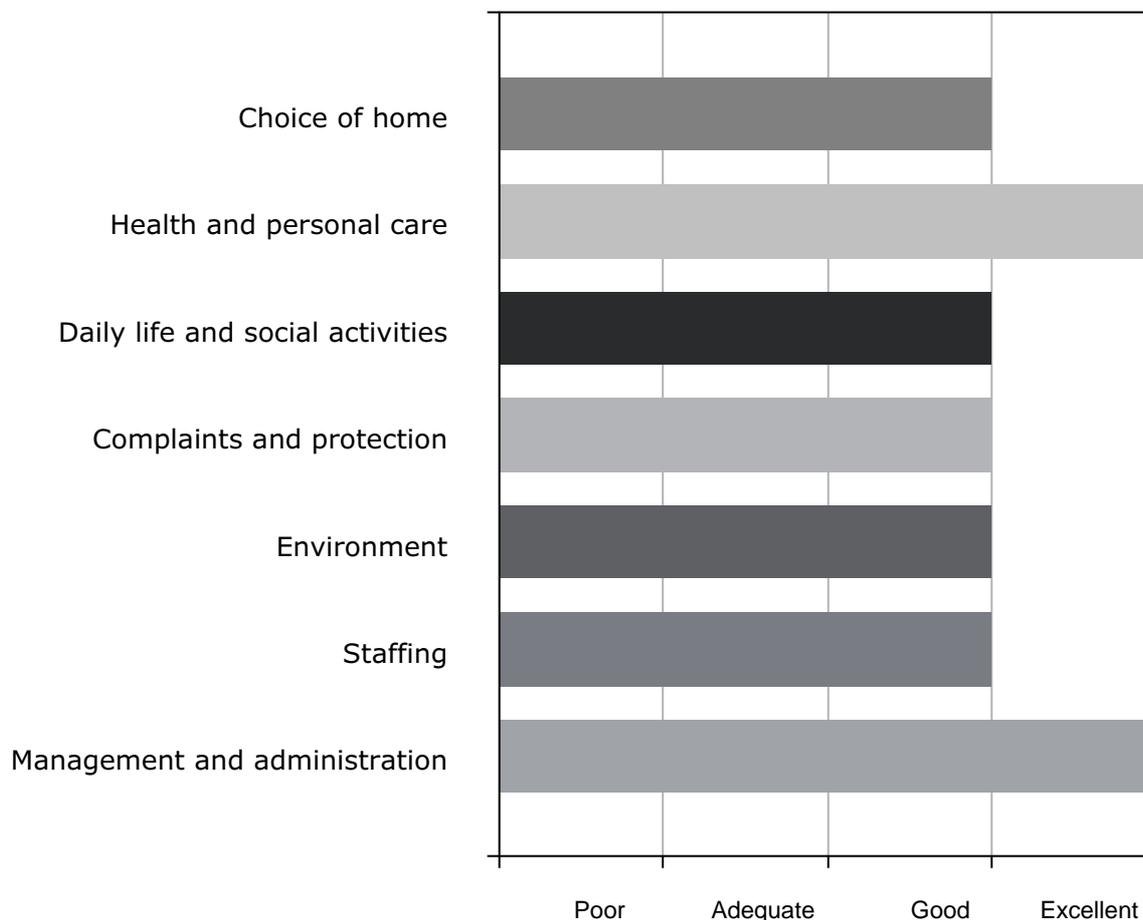
Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

three star excellent service

Our judgement for each outcome:



How we did our inspection:

We have reviewed our practice when making requirements, to improve national consistency. Some requirements from previous inspection reports may have been deleted or carried forward into this report as recommendations, but only when it is considered that people who use services are not being put at significant risk of harm. In future, if a requirement is repeated, it is likely that enforcement action will be taken.

Summary:

This is an overview of what the inspector found during the inspection.

How the inspection we carried out:- Before the visit we looked at, the information we

have received since the last visit on 30th May 2007.

How the service dealt with any complaints and concerns or protection of vulnerable adult issues since the last visit. Any changes to how the home is run. The provider's view of how well they care for people. The views of people who use the service and their relatives, staff and other professionals. Used surveys to find out the views of residents their relatives or representatives and professionals who visit the home.

The visit:

An unannounced visit was made on 24th April 2009, this visit was carried out over six hours.

During the visit we: Talked with people who use the service, the staff and the manager. A number of visitors were present during the visit and six were spoken to in private. Looked at information about the people who use the service and how well their needs are met. Looked at the records which must be kept. Checked the staff had the knowledge, skills and training to meet the needs of the people they care for. Looked around the building and parts of the building to make sure it was clean, safe and comfortable. Checked what improvements had been made since the last visit.

We told the manager what we found.

What the care home does well:

The home offers a very pleasant, well decorated and clean environment, which is safe and well maintained. The atmosphere in the home is good and there were examples of friendly but respectful exchanges between staff and residents.

There are detailed contracts and admission assessments available to ensure residents are able to make choices about where to live. Residents are also encouraged to visit the home before deciding to live there on a permanent basis.

The staff assist the residents to maintain their health care needs in a way that promotes their dignity and independence. The residents were very complimentary about the staff and the care they receive. Comments include "the staff are always kind and helpful", and "there is always staff around to make sure that I can do what I want".

The home delivers the clinical care in a way that maintains the residents dignity and the staff provide the residents with high quality support to make sure that their quality of life is as good as it can be. An example of a comment by a General Practitioner who visits residents in the home was that the home has "committed motivated staff" and that they give "very good nursing care". The residents are given good quality nutritious food that they enjoy in pleasant surroundings.

The home is very well managed in the best interest of the people who live there. The good leadership from both the manager, deputy and the senior team supports the staff and allows them all to work well as a team.

What has improved since the last inspection?

No requirements were identified at the last inspection.

The manager is aware of the need to continually consider ways of improving how the home operates and support people to live active and fulfilled lives. An example of the way that the home have made improvements to the practice is how they have improved the way that residents are supported at the end their lives. The manager and staff staff have received specialist clinical training to make sure that they are using best practice at this important time.

The social activities programme has been further improved to focus on the residents choices and aspirations. The activities coordinator is a popular figure in the home and is always looking at ways of encouraging both the residents and the families / representatives to become more active in the home and the events that she arranges.

What they could do better:

No requirements or recommendations were made as a result of this inspection.

The Manager continually works toward developing the quality assurance process so that they can make ongoing improvements to the service.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details set out on page 4.

The report of this inspection is available from our website www.cqc.org.uk. You can get printed copies from enquiries@cqc.org.uk or by telephoning our order line –0870 240 7535.

Details of our findings

Contents

Choice of home (standards 1 - 6)

Health and personal care (standards 7 - 11)

Daily life and social activities (standards 12 - 15)

Complaints and protection (standards 16 - 18)

Environment (standards 19 - 26)

Staffing (standards 27 - 30)

Management and administration (standards 31 - 38)

Outstanding statutory requirements

Requirements and recommendations from this inspection

Choice of home

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The residents needs are clearly identified during a good comprehensive pre admission assessment, and they are given the necessary information to help them make up their mind.

Evidence:

Each resident has a contract which gives the terms and conditions of the stay in the home. This includes the accommodation provided, fees, care and service provision, additional services, and rights and obligations for both the resident and the home.

The care plans showed that residents have a full needs assessment carried out by care managers before being admitted to the home. The nurse assessor, home manager or senior nurse also carries out a full assessment of need before anyone is admitted to the home.

Evidence:

Potential residents are encouraged to visit the home before admission. They are able to visit for part of a day and have a meal with other residents and join in any activity event in the home. They are provided with good information on which they can base their decision to move into the home.

All residents have a six-week trial period after which a multi disciplinary review is held with the resident and their representative. Following the review the decision to stay in the home is then made.

Health and personal care

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People's health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People living in the home have their health and personal care needs met in a very well planned way and the care is delivered in a respectful but friendly manner.

Evidence:

The care plans are well written and include a detailed assessment and a plan of how the care will be given. They are up to date and have the necessary information to make sure that the people living in the home have their wishes and preferences taken into account when the care is planned. Relevant risk assessments are completed for, prevention of falls, wound care, moving and assisting, and continence promotion. There is an assessment to look at resident's food and fluid intake. If a resident has any unplanned weight loss a plan is drawn up to address this. In one care plan this included getting advice from a dietitian and speech therapist and in another speaking the residents General Practitioner.

Residents access NHS services and facilities as necessary. The care plans showed that specialist advisor's are used for individual residents it necessary. They have

Evidence:

descriptions of how the personal and health care needs of the residents are being met. Returned questionnaires from residents and relatives confirmed this, and visiting relative said that she felt that there was "very good care", and that there is "excellent staff, the family are really happy with the home". The care being given during the visits also showed this for personal and health care areas.

Social assessments have been improved and are now in sufficient detail to reflect the way the resident would have their social needs met. There are a number of social opportunities available in the home and this is now being reflected in the individual care plans and the records of activities being enjoyed.

Medicines management was in line with guidance. The staff record the medicines correctly when they are ordered. The prescriptions are then checked when they are received in the home from the General Practitioners and are then sent to the Chemist for dispensing. The medicines received from the pharmacy are checked against the record of what was ordered and prescribed so that any errors can be picked up. Medicines no longer required are disposed of safely. No resident manages his or her own medication.

The home has a good strategy for supporting residents in their "end of life" care. They have worked closely with the specialist adviser and a number of the staff including the Manager and six nurses have attended the specialist training provided by the service. The documentation to show how this is done is in place and the staff records are up to date and detailed.

Daily life and social activities

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The people living in the home are well supported to live active and fulfilled lives in line with their choices, abilities and previous lifestyles.

Evidence:

There is an activity co-ordinator employed who organises the activities and spends time with residents on a one to one basis. On the day of the visit she was occupied in spending time with the residents and assisting with the meal times. There was a list of planned activities advertised throughout the home, including specific events and regular things that occur including craft sessions, manicures, quizzes and chair-obics. There has been a programme developed to identify individual residents choices and their participation in activities. This also describes if the resident has enjoyed it.

The residents were dressed for the activities they were undertaking and looked smart and tidy. The residents who were able to speak to me were positive about the care being given. Comments made included "the staff are nice".

The food being served on the visit was well received by the residents on the day. A second alternative is offered which residents can choose from prior to the mealtime.

Evidence:

Alternatives were offered for both the main meal and the pudding/sweet. The residents were complimentary about the food during the mealtime and appeared to enjoy it. There are opportunities for the residents to invite their relatives in for a family meal. These include specific evenings, for example the Curry nights (twice per year) or holiday times such as last Christmas when thirty relatives and the residents were entertained with a meal and a visiting entertainer.

The cooks have a good understanding of the dietary needs of the residents, and how to increase the calories in the food being served for those at risk of weight loss. Fresh fruit is served in a variety of ways. Milk drinks with fruit added (smoothies) are also offered as an alternative to tea and coffee on the afternoon "tea trolley". Residents were complimentary about the food being served. Breakfast was especially popular when a full-cooked breakfast, cereals, toast and egg or bacon sandwiches are available.

The morning "tea trolley" offered a varied selection of drinks. There was tea, coffee, or cold drinks of either juice or milk. There were biscuits provided. During the afternoon an ice cream van visited the home, which it does twice a week, so that residents could choose to have an ice cream if they wish to.

The bedrooms are nicely personalised according to the taste of the resident and where possible they choose their own decoration. Two residents said they were happy with their rooms and that they had a lot of their own personal items around them.

Residents have visitors at any time and are able to use their own rooms, or the lounges to see them. Three relatives said that they are welcomed into the home. Residents said they were happy with the arrangements for visitors.

Complaints and protection

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

If people have concerns with their care, they or people close to them know how to complain. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

There are good policies and procedures in place which are followed by the staff to make sure that complaints are dealt with effectively and that residents are safeguarded from harm.

Evidence:

The complaints procedure is available in the service users guide and a copy is displayed in the home. There has been one complaint recorded since the last inspection. The record of complaint was detailed and had been investigated fully. These were detailed and included the outcome and the action taken in response to the investigations. The records were dated and signed by the manager.

Two relatives who were visiting the home were aware of the complaints procedure but had not needed to use it. They said "the staff listen if there is a problem but I haven't got any thing to worry about".

Since the last inspection the home has been involved in one Vulnerable Adults investigations. This is a process led by Social Services and is used to ensure that there is involvement of professionals from outside of the home in considering any event which has effected the welfare of a resident /or residents. The manager worked well within this process and the involved professionals were confident that the manager works well to make sure that the service protects residents.

Evidence:

Staff are given protection of vulnerable adults training both as part of the in-house training package.

Environment

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People stay in a safe and well-maintained home that is homely, clean, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home offers accommodation which is clean and well maintained and has design features to help people of this client group and to promote their dignity, comfort and welfare.

Evidence:

The home is clean and was odour free. It is well decorated and maintained and there are a number of lounge areas for the resident to choose from. The main lounge on the ground floor has a large conservatory adjacent to it that opens onto a very pleasant garden area.

The Manager is aware of the need to have in place a redecoration programme to deal with any wear and tear occurring. The residents' and relatives who were asked about the bedrooms said they were happy with the decoration and that they were kept clean by the staff.

There has been a number of areas redecorated and refurbished since the last inspection including the replacement of the corridor carpets on the ground floor.

There are three bathrooms and one shower on each floor. The bathroom areas have been re-decorated and were pleasant and clean.

Evidence:

The laundry was clean, organised and well equipped. The laundry staff use gloves and aprons as necessary. There are three washers, which have a sluice facility and two dryers. The laundry is equipped with a roller press and domestic type iron.

The sluices were tidy and clean and the disinfectors operational. Staff follow infection control policies and use appropriate equipment.

Staffing

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have safe and appropriate support as there are enough competent staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

There are skilled, well trained, and competent staff employed in sufficient numbers to make sure that they can provide very good care to the people living in the home.

Evidence:

Staff recruitment records are completed according to the company policies and procedures, including two references and a completed application form. The requirement to have a CRB and POVA check is applied to all of the staff in the home. On visit there were sufficient staff to meet the needs of the residents. These were the Manager, deputy, two nurses, nine care staff, two domestic staff, one chef, two kitchen assistants, one working in the laundry, an administrator who works four days per week an activities co-ordinator and the handyman.

The manager identifies training, which would improve practice and has taken steps to make improvements to the documentation completed for residents as a result of training received.

The training records were looked at. There is training in both statutory and clinical areas and staff are given training in line with the company policy. Training provided includes Health and Safety, skills for care induction, first aid, medicine awareness training, food hygiene, infection control and customer care. Fire training and moving

Evidence:

and handling training is up to date.

The number of staff who have achieved NVQ 2 or NVQ level 3 is 29 out of 30 staff who are employed. This is a significant achievement. A number of staff have already achieved NVQ level three and an additional five are currently undertaking this.

The qualified nurses are supported to continue their professional development and have been offered additional clinical training in areas such as tissue viability, end of life care, and challenging behavior.

Management and administration

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

This is what people staying in this care home experience:

Judgement:

People using this service experience **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home is very well managed in line with good health and safety practices and in the best interest of the residents, making sure that their needs are met and that the staff are supported in the roles they undertake.

Evidence:

The registered manager, Mrs Morgan, has achieved the registered managers award and has been in the post for some time. She has extensive experience in working with older people and continues to develop her practice in line with the needs of the role. The deputy manager is working well to support her and there is a good management ethos in the home.

There is a system and good records in place to review health and safety in the home, involving all of the staff. There are records of regular staff meetings and the contents suggest that there is broad spectrum of relevant issues discussed.

Evidence:

The Manager arranges regular meetings with the relatives and residents these have also included bringing in specialist speakers, examples of which are Dementia care in July 2008 and End of Life in October 2008. The relatives spoken to were very positive about the way the home is managed and complementary about the level of involvement of the manager in the day to day running of the home.

Health and safety risk assessment in place for a wide range of activities and areas of the home.

The Manager continues to consult the residents, staff and other interested parties to review the service provided and manage the staff in a way to improve care delivered.

There has been a resident and relative survey carried out as part of the quality assurance process. These are returned and analysed so that the Manager can include the information in the homes development plan.

Audits are carried on care planning, infection control, and medication. The Manager operates an "open door" policy of being available to residents and relatives informally when on duty.

There is a system in place for undertaking staff supervision. This is up to date and there is a matrix in place to ensure that the Manager can monitor the progress of the supervisions being completed.

The personal records kept in the home of residents who are receiving assistance to manage their finances were examined and are detailed, logical and appropriate. Receipts were in place for purchases made on behalf of residents and signatures of either two staff or one and the service user were in place.

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action
-----	----------	------------	-------------	----------------------

Requirements and recommendations from this inspection:

Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action
-----	----------	------------	-------------	----------------------

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
-----	----------	------------	-------------	----------------------

Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No.	Refer to Standard	Good Practice Recommendations
-----	-------------------	-------------------------------

Helpline:

Telephone: 03000 616161 or

Textphone: or

Email: enquiries@cqc.org.uk

Web: www.cqc.org.uk

We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

Copyright © (2009) Commission for Social Care Inspection (CSCI). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CSCI copyright, with the title and date of publication of the document specified.