

We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

Keech Hospice Care

Great Bramingham Lane, Streatley, Luton, LU3
3NT

Tel: 01582492339

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We inspected the following standards as part of a routine inspection. This is what we found:

Care and welfare of people who use services ✓ Met this standard

Safeguarding people who use services from abuse ✓ Met this standard

Supporting workers ✓ Met this standard

Complaints ✓ Met this standard

Details about this location

Registered Provider	Keech Hospice Care
Registered Managers	Mr. Mike Keel Mrs. Elizabeth Searle
Overview of the service	Keech Hospice Care is a purpose built hospice on the outskirts of Luton. The service provides 13 overnight beds, a palliative care centre and a hydrotherapy pool. The service provides nursing care to adults and children, many of who may be experiencing physical disability, life limiting conditions and/or terminal illness.
Type of service	Hospice services
Regulated activities	Accommodation for persons who require nursing or personal care Nursing care Personal care Treatment of disease, disorder or injury

Contents

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Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 3 July 2013, observed how people were being cared for and checked how people were cared for at each stage of their treatment and care. We talked with carers and / or family members and talked with staff.

What people told us and what we found

During our visit to Keech Hospice Care on 3 July 2013, the focus of our inspection was the children's unit. We spoke with the parents of some of the children using the service at the time of our visit. The people we spoke with told us their children received a thorough assessment of their needs and staff were very good at meeting those needs. They said they felt their children were safe and well cared for at Keech Hospice Care by professional, knowledgeable and friendly staff. In general, the people we spoke with had no complaints about the service. One person said of Keech Hospice Care: "I would tell anyone in my position that it has to be Keech." Another person said: "It's fantastic and I'd highly recommend them."

We found that each person received an assessment of their needs and these were regularly updated. The assessments were used to develop support plans of how the service would meet each person's needs. We saw that arrangements were in place to deal with foreseeable emergencies, including the provision of items for use in an emergency. We found that staff were receiving supervision, appraisal and professional development relevant to their roles and were trained in and knowledgeable about subjects such as protecting vulnerable people from abuse.

We found the service had a complaints system in place and people had their complaints responded to appropriately. Information about the complaints procedure was readily available to people who use the service.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent

judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Care and welfare of people who use services

✓ Met this standard

People should get safe and appropriate care that meets their needs and supports their rights

Our judgement

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

Reasons for our judgement

During our visit to Keech Hospice Care on 3 July 2013, the focus of our inspection was the children's unit. Throughout our visit we saw staff interacting with the people who use the service in a gentle, attentive and caring manner. Staff were seen to encourage and sing with the children during a music session and we saw that throughout our visit staff were with the people who use the service on a one to one basis. We also looked at a dedicated toy room and a sensory room on the children's unit which contained a padded floor area, fibre optic lights and bubble tubes among other things.

We spoke with the parents of some of the children using the service at the time of our visit. The people we spoke with said their children received an assessment of their care needs on their first visit to the service. On each subsequent visit, their assessments were reviewed by staff and any necessary updates or changes in their needs were recorded. People said the staff knew all about their children's support needs and about them as people. One person said: "I'm happy that the assessment of [my child] is very thorough. It is checked and double checked by staff and I'm always asked to confirm it's accurate." Another person said: "It's fantastic care here. Every time we come here we go right through [my child's] care plan again to review any changes." A third person said: "I'm quite happy [my child] is very well looked after here. I'm comfortable I've been able to tell the staff everything they need to know and we agreed [my child's] care together."

In our conversations with staff we noted they displayed a very good awareness of the lives and support needs of the people who use the service. The staff we spoke with were also knowledgeable about their roles and responsibilities in familiarising themselves with people's needs and the actions required to meet and record the provision of those needs.

We looked at the paper and electronic care records of some of the children using the service at the time of our visit. Each record contained an assessment of care for each person and a support plan of how the service would meet each person's identified needs. The support plans included identifying how the service could meet the cultural and

religious needs of each person throughout their stay. The plans contained clear and well documented risk assessments and the actions necessary to reduce the identified risks to each individual. We saw that a system was in place to review and record updates to each person's needs on every visit to the service. The system was used well.

We looked at the daily entries to the care records made by staff. We saw that the entries were detailed and varied. We noted there were no gaps in the completion of the notes for the period we checked. The care and level of support recorded as being provided, matched with the needs identified in people's personalised support plans. This meant that people's needs were assessed and care and treatment was planned and delivered in line with their individual care plan. The provider may find it useful to note that there was potential for confusion when staff made daily entries using the electronic records system. We noted that when night staff entered information at the end of their shifts, it was dated for that day, even if the care had been provided before midnight the night before.

During our visit we checked the items provided for use in an emergency including oxygen and emergency drugs kits (including adrenaline) and found them to be within their expiry dates. We looked at the records of daily checks made by staff on the drugs and equipment and found they had been very well completed. All the staff we spoke with told us they had received basic life support training, including Cardiopulmonary resuscitation (CPR). Our review of the service's training documentation confirmed this. We also noted that most staff at Keech Hospice Care had received the training. This demonstrated there were sufficient arrangements in place to deal with foreseeable emergencies.

People should be protected from abuse and staff should respect their human rights

Our judgement

The provider was meeting this standard.

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

Reasons for our judgement

The people we spoke with during our visit said they felt their relatives were very safe being cared for at Keech Hospice Care. They said the staff were friendly, caring and helpful. One person said: "I've seen how the staff are with [my child] and with other children and their manner is very relaxing and peaceful." Another person said: "I'm quite happy that [my child] is safe and well looked after here." During our observations we saw that staff were patient, calm and attentive to the people who use the service and their relatives.

The staff we spoke with were trained in and knowledgeable about forms of abuse, how to identify abuse and how to report it. They also displayed a good understanding of the requirements of the Mental Capacity Act (2005). The documentation we looked at showed that staff had access to safeguarding policies. The training records we looked at showed that the staff we spoke with had received safeguarding training. They told us the training had covered the requirements of the Mental Capacity Act (2005). We spoke with staff about any further measures in place at the service to protect people from the risk of abuse. All the staff we spoke with said they had received a Criminal Records Bureau (CRB) check. During our review of their staff files we looked at documentation that confirmed this. This meant that people who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

The provider may find it useful to note that from our review of the service's training records we found that some staff were overdue their safeguarding training updates. We also noted that some staff (10 out of more than 200 staff) had not yet completed the training.

Before our visit we looked at all the information we held about Keech Hospice Care. From our review of this information we found that the service responded appropriately to any allegations of abuse or incidents of suspected abuse by notifying the safeguarding team at the local authority and the Care Quality Commission (CQC) in a timely manner. This meant the provider responded appropriately to any allegation of abuse.

Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Our judgement

The provider was meeting this standard.

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Reasons for our judgement

The relatives of people who use the service we spoke with said they felt staff at Keech Hospice Care were professional, knowledgeable and caring. One person said: "They're not like staff; they're like my friends. This is the first place I've been able to leave [my child] and not worry as I trust what they do here." Another person said: "I have no concerns about how professional, trained and caring the staff are here. They're lovely. I leave [my child] here because I'm confident in their expertise." A third person said: "The staff are really lovely and very helpful and during [my child's] stay they communicate with me all the time."

The staff we spoke with told us that when they started employment with the service they had received a comprehensive induction program involving an assessment of their competencies and skills. They said they were required to complete a training program including, but not limited to, moving and handling, safeguarding and infection control. All the staff we spoke with said they were up to date with their training requirements. They said there was also considerable opportunity to attend, and encouragement from the service to complete, additional training relevant to their roles. This included courses in catheterisation and palliative care. They told us they could access supervision from their mentors or a senior staff member whenever they needed it and they had either completed or were due to complete an annual appraisal. The provider may find it useful to note that from our conversations with staff, we found the staff supervision system in use at Keech Hospice Care was ad hoc and informal as opposed to a formalised, structured system.

We looked at the personnel files of the staff we spoke with and the service's training documentation. We saw documentation that confirmed the staff had received a comprehensive induction program on starting employment with the service. We found that a staff appraisal system was in place. The provider may find it useful to note that one of the staff we spoke with was overdue an annual appraisal. We raised this with the clinical director and quality and compliance manager who told us that all staff would be receiving annual appraisals throughout August and September 2013. We saw that most staff had completed most of their mandatory training in accordance with the service's own requirements. This meant that staff received appropriate professional development and were able, from time to time, to obtain further relevant qualifications.

During our conversations with the nurses on the children's unit we found they had personal identification numbers (PIN) of registration with the Nursing and Midwifery Council. We checked the details of their registrations and found they were appropriately registered as nurses at the time of our visit.

People should have their complaints listened to and acted on properly

Our judgement

The provider was meeting this standard.

There was an effective complaints system available and comments and complaints people made were responded to appropriately.

Reasons for our judgement

The people we spoke with during our visit said they had no complaints or concerns about the care provided at Keech Hospice Care. They said they would feel comfortable raising any issues they had with the staff if they ever needed to do so. One person said: "I have no form of complaint about this service whatsoever." Another person said: "I have never had any concern at all. It's been a lifeline for us as a whole family." However, one person said the service's communication over whether her child had a booked stay or not could be better, although she had not formally complained about it.

During our visit we saw the service had leaflets detailing its complaints procedure provided around the premises including in the main reception and waiting area and on entering the children's unit. The leaflets detailed the process for making complaints, how they would be investigated and the timescales in which complaints would be dealt with. Contact details for organisations such as the Parliamentary and Health Service Ombudsman were provided for people to take their complaints further if they were not satisfied with the outcome reached by Keech Hospice Care. We also looked at the service's full complaints policy and procedure which provided more detail on the areas covered in the leaflet. This meant that a process was in place for dealing with complaints and people had access to adequate information about that process.

We spoke with the quality and compliance manager at the service who told us there had been four complaints made against the service in the past year. All of the complaints made had concerned the children's unit. We saw the complaints had been well recorded in the service's complaints log and details of all the complaints were kept on file. We looked in detail at one of the complaints from parents about their child's care at Keech Hospice Care. We saw the service had made an initial response with an apology. The service provided regular progress updates to the complainants through the course of the investigation completed by an independent body. The investigation report concluded there had been avoidable errors and the service had responded with an action plan to implement changes and avoid repetition of the errors. During our visit we saw the action plan was near completion. We also found the independent investigation report had concluded Keech Hospice Care had responded openly and honestly to the complaint. This meant that people's complaints were fully investigated and attempts were made to resolve them, where possible, to their satisfaction.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

Minor impact - people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact - people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact - people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

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