Gainsborough Care Ltd

Redcote Residential Home

Inspection report

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05 March 2020

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Ratings

Overall rating for this service	Requires Improvement
Is the service safe?	**Requires Improvement**
Is the service well-led?	**Requires Improvement**

Summary of findings

Overall summary

About the service
Redcote Residential Home is located in Gainsborough and provides care and support for up to 28 people aged over 65. The service is set over two floors. At the time of inspection there were 27 people using the service.

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

The registered manager had implemented systems to enable them to have clear oversight of accidents and incidents which took place in the service. This included an investigation of each incident reported and identifying trends. Action taken to reduce the risk of re-occurrence was clear.

Medicated creams which had been prescribed by the GP had clear guidance for staff to enable them to apply this safely and effectively. Information relating to medicine where people were prescribed 'one to two' tablets was clear and documented on the MAR chart (Medication Administration Record).

The provider had sought support and guidance from a Care Improvement Associate (CIA) to implement effective quality monitoring processes in the service. The registered manager monitored quality in all aspects of the service and where short falls were found, action plans were in place. The provider had oversight of achievements and shortfalls in the service.

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 requires improvement (published 06 December 2019).

Why we inspected
We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

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?

Requires Improvement

The service was not always safe.

Details are in our safe findings below.

Is the service well-led?

Requires Improvement

The service was not always well-led.

Details are in our well-led findings below.

Redcote Residential Home

Detailed findings

Background to this inspection

The inspection
This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 17 Good Governance of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Inspection team
This inspection was carried out by one inspector.

Service and service type
Redcote Residential Home 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, including the action plan submitted by the registered provider. We sought feedback from the local authority who work with the service.

We did not ask the provider did not complete the required Provider Information Return. This is information providers are required to send us with key information about the service, what it does well and improvements they plan to make. We took this into account in making our judgements in this report.

We used this information to plan our inspection.

During the inspection
We reviewed a range of records. This included multiple medication records and information relation to accidents and incidents. We looked at quality assurance systems which had been implemented since the last inspection.

Requires Improvement

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 requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

At the last inspection we identified there was a lack of oversight of accidents and incident which had taken place in the service. A theme and trend analysis had not been completed to ensure measures had put in place to prevent re-occurrence. We also identified documentation relating to the safe administration of medicine was not accurate and did not provide sufficient guidance for staff to enable them to administer medicines safely and consistently to people. At this inspection, we found improvements had been made.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- The registered manager had implemented systems to enable them to have full oversight of accidents and incidents which took place in the service.
- New management review forms had been implemented following the receipt of an incident record. The registered manager conducted investigations in to each incident and had detailed action taken to reduce the risk of re-occurrence. For example, when one person fell, they appeared confused. The registered manager requested for their urine to be tested, which confirmed an infection. Treatment was then sort for the person.
- Monthly theme and trend analyses of incidents had been completed by the registered manager and this was discussed with senior staff in meetings. This analysis detailed an overview of incidents which had taken place and action taken to prevent re-occurrence. For example, where a person had several falls a referral was made to the fall's prevention team.

Using medicines safely

- The registered manager had taken appropriate action to ensure there was clear guidance for staff when administering people's medicines. For example, specific instructions for prescribed creams had been sought, about how often they should be applied and to which part of the body.
- We reviewed people's medicine profile's and MAR charts (Medication Administration Records), to find these had been revised and personal details, such as allergies, were documented in line with each other.
- Where people were prescribed variable dosages of medicines, for example, one or two tablets, this was now clearly documented, and some instructions had been reviewed and amended by the GP for clarification for staff.

Requires Improvement

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 requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

At the last inspection we identified there quality monitoring systems had not been effective at identifying shortfalls in the service. The registered provider lacked over sight of the service and during visits, did not identify concerns that were found during the inspection. At this inspection, improvements had been made.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered provider had sought guidance and support from a Care Improvement Associate (CIA) who had been supporting the service to implement effective quality assurance systems. The registered manager had an auditing schedule to enable them to look at aspects of the service.
- Quality audits had been completed to check a variety of areas in the service. For example, infection control/ environment, medicines and catering. Some of these found short falls and action plans had been developed. Where actions were required, the registered manager had set a target date to complete these actions and had signed completed actions off.
- The registered provider and the CIA worked together to ensure there was an oversight of quality in the service. The registered provider had received detailed reports from CIA visits and was aware of improvements still needed in the service.