

Catholic Blind Institute

# Christopher Grange Rhona House

## Inspection report

Youens Way  
East Prescott Road  
Liverpool  
Merseyside  
L14 2EW

Tel: 01512202525

Date of inspection visit:  
29 June 2021

Date of publication:  
09 August 2021

## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Christopher Grange Rhona House is a residential care home providing personal and nursing care to 25 people at the time of the inspection. The service can support up to 28 people in one adapted building.

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

People received safe care and treatment. Staff administered people's medicines in a safe and effective way.

Staff safeguarded people and understood the importance of supporting people to make their own choices and decisions where possible.

The environment was safe and clean. Staff followed good practices in relation to the prevention and control of infectious disease.

Staff were checked for good character before being recruited and staff told us they were supported by managers and encouraged to develop their skills and knowledge during their induction period.

The registered manager quality assured the running of the service and lessons were learnt when things went wrong.

Staff did not always maintain accurate and contemporaneous records in relation to the support they had provided people. The manager had identified this before the inspection and showed us an action plan which showed progression was being made.

Staff told us they were able to seek support from the managers and enjoyed working at Rhona House. A large number of staff had worked at the service for many years. The managers submitted statutory notifications and were aware of their regulatory responsibilities. People who lived at the service told us they felt involved and in control of their lives.

Information technology systems were used to monitor and improve the quality of care. The provider had implemented CCTV in communal areas without consultation with people who lived at the service, relatives and staff. The manager assured us they would look at building a new policy and procedure in line with best practice standards around use of CCTV in care homes. After the inspection the manager sent us further evidence to show this had been actioned.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 12 June 2018).

### Why we inspected

We received concerns in relation to safe care and treatment and staff conduct. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

The overall rating for the service has not changed.

### 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?

Good ●

The service was safe.

### Is the service well-led?

Good ●

The service was well-led.

# Christopher Grange Rhona House

## **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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection was carried out by two inspectors.

#### Service and service type

Christopher Grange Rhona 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 who had commenced the process to become 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. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

#### During the inspection

We spoke with six people who used the service about their experience of the care provided. We spoke with the nominated individual; the nominated individual is responsible for supervising the management of the service on behalf of the provider. We spoke with clinical lead, two registered nurses, two support workers and a housekeeper.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at two 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.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at an action plan in relation to care planning and evidence to support the use of CCTV in communal areas.

# 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

- Systems and processes were in place to protect people from abuse. The managers ensured accidents and incidents were investigated, recorded and reported.
- People were supported by staff who had been trained in safeguarding adults and staff demonstrated they understood how to recognise signs of abuse and who to report to.
- People told us they felt safe and were comfortable with the care given at Christopher Grange Rhona House. One person said, "The staff are all great."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff completed and reviewed risk assessments for people in a person-centred way. Risk assessments were understood and followed by staff and people told us they felt safe when staff supported them.
- The managers audited the environment and maintenance work was undertaken when needed. Environment safety checks were carried out by suitably qualified personnel.
- Staff of all grades understood emergency evacuation and fire safety designed for Christopher Grange Rhona House. People's care plans included information about how best to support them in the event of an emergency evacuation.
- Managers ensured lessons were learnt when things went wrong. Staff told us they were included in the review of accident and incidents and felt their opinions mattered. There was an open and transparent culture for reporting.

Staffing and recruitment

- The managers ensured staff were recruited in a safe way; checks were undertaken to ensure new starters were of good character and suitable for the role.
- Staff told us they undertook induction training and felt supported during the induction process.
- People told us staff responded to their call bells in good time and they felt enough staff were deployed. Comments included; "Yes, as soon as I call for help they come." And "Staff are always there day and night if I need them."

Using medicines safely

- Registered nurses administered people's medicines in a safe and effective way.
- The processes in place for the management of people's medicines were robust and in line with best practice standards.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.



# 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Staff supported people in a person-centred way. People told us they felt empowered and involved in the planning of their care and treatment. People also told us they felt confident to raise their concerns or ask for help. Comments included; "If I ever have a problem or need support I would always contact one of the sisters in charge." And "I can stay in bed, I can get up, I just ask the staff for support when I am ready."
- Staff fully considered people's equality and encouraged them to maintain their identity and relationships. We saw people achieved good outcomes whilst they lived at the service.
- Staff meetings and supervisions were available for staff to share any feedback. Staff said they could make suggestions and raise concerns. One staff member told us, "I really love my job, I can go to [the manager] and share my ideas or concerns, I feel very supported."
- Staff did not always maintain accurate and contemporaneous records in relation to the support they had provided people. The manager had identified this before the inspection and showed us an action plan which showed progression was being made.

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

- Managers demonstrated good knowledge about duty of candour. People's care records showed good communication with people and their relatives was maintained when things went wrong.
- The nominated individual had applied to become the registered manager and there was a clinical lead who was an experienced registered nurse.
- Managers were clear about their roles and regulatory requirements. The manager submitted statutory notifications to inform us about incidents at the service, this assists with regulatory monitoring.
- It is a legal requirement that the provider's latest CQC inspection report is displayed at the service where a rating has been given. This is so people, visitors and those seeking information about the service can be informed of our judgments. We found the provider had displayed their rating in the entrance hall.
- Information technology systems were used to monitor and improve the quality of care. The provider had implemented CCTV in communal areas without consultation with people who lived at the service, relatives and staff. The manager assured us they would look at building a new policy and procedure in line with best practice standards around use of CCTV in care homes. After the inspection the manager sent us further evidence to show this had been actioned.

Working in partnership with others; Continuous learning and improving care

- Managers sought people's feedback and listened to stakeholder ideas and opinions.
- Managers and senior staff worked in partnership with external professionals and made sure important information was communicated in a timely way.
- Quality assurance processes were effective and demonstrated timely action planning when remedial work was needed.