

Complete Care Homes Limited

Rambla Nursing Home

Inspection report

374 Scalby Road
Scarborough
North Yorkshire
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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?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Rambla Nursing Home is a nursing and residential care service. The service provides care for up to 30 adults over the age of 18, including people living with a physical disability or dementia. At the time of this inspection there were 29 people who used the service and all required nursing care.

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

The quality of documentation and record keeping had improved. Staff knew about people's individual care needs and care plans were person-centred and detailed.

Improvements had been made to the management and organisation of the service. The registered manager assessed and monitored the quality of care. People and staff were asked for their views and their suggestions were used to continuously improve the service.

People felt safe and well supported by the staff. The provider followed robust recruitment checks to employ suitable staff. There were sufficient staff employed to ensure care was carried out in a timely way. People's medicines were managed safely.

Staff provided effective care; they were confident in their knowledge and skills, understood people's needs and knew how to support them. Staff worked closely with professionals. If people were unwell, staff made sure they received the medical attention they needed.

People had choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People received good care; they said staff treated them with dignity, respect and compassion.

There was a programme of activities open to everyone living in the service. These were tailored to people's individual preferences.

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 1 October 2018). The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This was a planned inspection based on the previous rating.

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 responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Rambla Nursing Home

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 one 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

Rambla Nursing Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (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 CQC. 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 the provider, nominated individual, registered manager, a nurse, two care staff, the

housekeeper and an activity co-ordinator. The nominated individual is responsible for supervising the management of the service on behalf of the provider. Five people, four visitors and a visiting professional gave us feedback on their experience of the service.

We reviewed a range of records. This included two people's care records and 15 medication records. We looked at three 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 received feedback from two professionals who regularly visit the service.

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

- The provider had effective safeguarding systems in place. Staff had a good understanding of what to do to make sure people were protected from harm or abuse. They had received appropriate training in this topic.
- People felt safe, confident and happy when being supported by staff. A person said, "Staff are kind and helpful, they make sure everything is okay."

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

- Staff identified and assessed risks; care plans contained guidance to support staff on how to safely meet people's needs. This included information on how to avoid restrictive practices and safely support people if they became anxious or upset.
- Accidents and incidents were recorded and responded to appropriately to ensure outcomes could be achieved and lessons learned. The registered manager monitored these to reduce the risk of reoccurrence.
- The environment and equipment were safe and maintained. Emergency plans were in place to ensure people were protected in the event of a fire.

Staffing and recruitment

- The provider operated a safe recruitment process.
- Enough staff were deployed to meet people's needs. A person told us, "The staff are good and do the best they can. I always get the care I need."
- Staff were available throughout the home and were patient and attentive when supporting people. They told us, "It is hard work, but we have a good staff team and work together well."

Using medicines safely

- Medicines were safely received, stored, administered and returned to the pharmacy when they were no longer required.
- Staff received medicine management training and competency checks were carried out.

Preventing and controlling infection

- The service was well-maintained, clean and tidy throughout. Staff followed infection prevention and control procedures to ensure people were protected from the risk of infections spreading.
- There was a lack of storage in the sluice for cleaned commode pots and no protective eye wear for staff when cleaning these. The registered manager said they would order drying racks and goggles straight away.

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

- Care was based on a thorough assessment of people's needs and preferences. Information was sought from the person, their relatives and relevant health care professionals. This helped inform staff about the care and support people required
- Staff applied learning effectively in line with best practice, which led to good outcomes for people and supported a good quality of life.

Staff support: induction, training, skills and experience

- Staff had completed a comprehensive induction and training programme. They had opportunity for supervision and appraisal. A member of staff told us, "The new manager has organised more training updates and regular supervisions."

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

- People had access to a varied and balanced diet. They told us, "The food is really good," and "I never refuse anything, I am always pleased with what I get. They usually ask you what you would like."
- People received sufficient fluids. Staff made them a drink when asked and they had drinks available in their bedrooms and in the communal areas.
- People's weight and nutritional intake were monitored by staff; appropriate action was taken if there were any concerns.

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

- Staff monitored people's health and wellbeing and sought medical support when needed. A visiting professional told us, "The nurses are professional and knowledgeable. They call out GPs when needed, ring up for results and follow up appropriately. The service manages people with complex medical needs and does this very well."
- Information was recorded and ready to be shared with other agencies if people needed to access services such as hospitals.

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

- Appropriate equipment was in place to assist staff when moving and handling or supporting people with their care. This included specialist beds, hoists and sensor mats; which helped staff provide safe and effective care.
- People were able to access outdoor space. People told us, "There is a lovely garden area, which we get to

down a ramp or by the steps. It is a nice place to sit during the warmer weather," and "I love sitting out here, it is so peaceful."

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.

- People were routinely involved in decisions about their care; staff sought people's consent and supported them to have choice and control over all aspects of their support.
- People's rights were protected; staff assessed people's mental capacity and made best interest decisions when needed.
- Appropriate applications had been made to deprive people of their liberty.

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

- Staff listened to people and provided sensitive support to ensure their views were promoted. People were happy and relaxed in the company of staff. A person said, "The staff are marvellous, they look after me extremely well."
- Staff treated people as equals. They showed genuine concern for people and were keen to ensure people's rights were upheld and that they were not discriminated against in any way.

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

- Staff listened to people and responded to their requests; they worked hard to understand what was important to people and planned their care accordingly.
- People were supported to communicate their wishes and views; their care plans included detailed information about how they communicated.
- Information on how to access an advocacy service was available from the registered manager. An advocate is an independent person who supports someone so that their views are heard, and their rights are upheld.

Respecting and promoting people's privacy, dignity and independence

- People were supported to maintain their dignity; staff helped people meet their personal care needs and dress according to their personal preferences. A person said, "Staff are just respectful and do their job perfectly."
- Staff spoke with people in a polite and respectful way and showed an interest in what people wanted to say to them. They called people by their preferred name, knocked on bedroom doors before entering and ensured people had privacy when supporting them with personal care.
- People were supported to be as independent as possible. Staff encouraged people to do what they could for themselves and helped when they needed it.

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 requires improvement. At this inspection this key question has improved to good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

At our last inspection the provider failed to ensure each person had an accurate, complete and contemporaneous record of care. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Improvements had been made to the quality of care records. They were detailed, up to date and reflected the care being delivered. When people's needs changed, their care and support was assessed and amended in their records.
- People received person-centred care; staff had a detailed understanding of their needs and what was important to them. A person told us, "I can talk to the staff about what I want. They listen to me and do their best to accommodate my wishes."
- People and their representatives were involved in reviews of their care. Communication had improved between staff and families and we received positive feedback about this. One relative said, "We don't have any problems with anything. We feel happy with everything. We trust them."

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.

- People were supported to tell staff about their wishes and views; their care plans included detailed information about how they communicated.
- Staff gave people information in different ways to help them understand and be involved in decisions to maintain their independence. For example, one person liked to receive information in an easy-read picture format, whilst another person liked their information to be given verbally.

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

- People enjoyed the social activities arranged for them. They attended meetings to discuss what they

would like to do over the coming months.

- Activities were based on what people wanted on the day, although there were also weekly planned activities. Many said they liked their own company to read and watch their television. Some were sitting on the veranda overlooking the garden, enjoying the good weather. People did arts and crafts, quizzes, board games and entertainers came into the service offering exercise sessions and musical afternoons.
- The activities person carried out one-to-one interactions with people such as nail care, putting music and films on, where people needed assistance, and ensuring everyone had quality time spent with them.
- Relatives were made welcome when they visited. One said, "Staff always greet me with a friendly smile and offer me a drink when I visit."

Improving care quality in response to complaints or concerns

- People and relatives told us the registered manager was open to receiving feedback and acted on their concerns. A relative told us, "The manager is really good. They do respond."
- The registered manager acted upon complaints in an open and transparent way. They used any complaints received as an opportunity to improve the service.

End of life care and support

- Staff were aware of good practice and guidance in end of life care and knew to respect people's religious beliefs and preferences.
- We received positive feedback from healthcare professionals. One said, "Staff follow people's wishes for preferred place of death. They require little support in delivering the care and are aware to contact professionals if advice is required. The service takes people who are discharged from hospital and require end of life care. In my experience the staff are confident in looking after people with palliative and end of life needs."

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. At this inspection this key question has improved to good. 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; 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

- The registered manager was committed to providing good quality care to people. Relatives said, "The manger has been here since we came, they are very nice. They have been good from day one, which is reassuring," and "There is a good feeling here, very pleasant and calm. This gives us peace of mind when we are not around."
- Staff morale was high. They felt listened to and told us the registered manager was approachable. They understood the provider's vision for the service and worked as a team to deliver high standards of care.
- The service was well run. It was welcoming and friendly; people were treated with respect and professionalism.

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

- Regular checks were completed by the staff and registered manager to make sure people were safe and happy with the service they received. All issues found had been used to continuously improve the service.
- The registered manager communicated all relevant incidents or concerns both internally to the provider and externally to the local authority or CQC as required by law.

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

- People, relatives, staff and health care professionals were asked for their opinions of the service. Meetings, satisfaction surveys and one to one discussion were used to gather feedback. This was analysed and followed up by the registered manager.

Working in partnership with others

- The service had good links with the local community and worked in partnership with other agencies to improve people's opportunities and wellbeing.