

Burlington Care Limited

Randolph House Care Home

Inspection report

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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

Randolph House is a residential care home providing accommodation and personal care to up to 70 older people some of who have dementia or a physical disability. At the time of the inspection 35 people lived at the service.

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

Improvements had been made to ensure people received their medicines safely. Medicine administration record (MAR) were completed and medicine audits ensured any errors were actioned timely.

For people who had 'as required' medicines, the process of recording when medication had been administered was not consistent.

We have made a recommendation about recording 'as required' medicines.

Staff were recruited safely. Checks were completed to ensure they were safe to work with vulnerable people. They received an induction, training and shadowing prior to starting work.

People were supported by staff who knew them well which enabled positive relationships to develop. One resident told us, "The staff are all really good, they are smashing."

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The registered manager and staff had a clear understanding of their roles and responsibilities and staff understood when to escalate any concerns for further investigation and transparency.

There was a positive approach to continuous improvement in the service. Regular checks, audits and feedback were reviewed to ensure standards were maintained. Where improvements were required, these were actioned to ensure the safety and quality of the service people received.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was requires improvement (published 24 April 2019) and there was a breach of regulations. 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

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Randolph House on our website at www.cqc.org.uk.

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.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Randolph House Care 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

The inspection was carried out by one inspector.

Service and service type

Randolph 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.

Notice of inspection

This inspection was announced from outside the service on the day of inspection. We did this to discuss the safety of people, staff and inspectors with reference to Covid-19.

What we did before 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 including an independent consumer champion for health and social care services in England. 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 two people who used the service about their experience of the care provided. We spoke with seven members of staff including a senior care worker, care workers, the regional operational manager, regional quality assurance manager and registered manager.

We reviewed a range of records. We looked at multiple medication records and a variety of records relating to the management of the service, including policies and procedures were reviewed. We also looked at three staff files in relation to recruitment and staff supervision.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at quality assurance records. We spoke with two professionals who visit the service and two relatives about their experience of the care provided.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.
(ensure there is a full stop at the end of the sentence)

At the last inspection this key question was rated as Requires Improvement. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Medicine administration records for 'as required' medicines were not consistent. Some records were completed whether the medicines were given or not and others were only completed when a medicine was administered.

We recommend the provider review the current practices alongside their medication policy and take action to ensure a consistent approach.

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) 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 12.

- An effective medicines audit system was in place to ensure safe practice and improvements were evident.
- The registered manager ensured any errors were investigated and action was taken to make improvements and re-train staff if required.
- The registered manager assessed the competency of staff in administering medicines safely.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse.
- People and their relatives told us they felt safe. One person told us, "I feel very safe". A relative told us, "[Name of Resident] is happy and safe and the staff are nice."
- Staff had a good understanding of safeguarding. They knew how to identify different types of abuse and who to report any concerns to.
- The registered manager understood their responsibility to share all safeguarding concerns with the local authority and CQC to ensure these were addressed properly.

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

- Risk assessments provided detailed guidance for staff on how to manage and reduce identified risks for people.
- Staff routinely carried out safety checks on equipment and in the environment to ensure it was safe for

people living in the service.

- Personal evacuation plans were in place; guiding staff on how to support people in the event of an emergency.
- Accidents and incidents were recorded and the registered manager monitored for any trends and put action plans in place where required. Any lessons learnt were shared with staff to prevent incidents in the future.

Staffing and recruitment

- Recruitment of staff was completed safely with all required checks completed.
- The registered manager used a dependency tool which ensured appropriate staffing levels were in place to meet the needs of people in the service.

Preventing and controlling infection

- The environment was clean and tidy and free from any malodours.
- The provider had implemented new regimes for infection control in line with current and relevant national guidance. to enhance practice during the Covid-19 pandemic.
- Staff had received infection control training and followed the provider's infection prevention procedures.
- Staff used personal protective equipment such as gloves, aprons and masks to protect themselves and people from the risk of infection.
- The registered manager had introduced a 'quarantine zone' in the home in case of any potential outbreaks of COVID 19.

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 now 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; Continuous learning and improving care

- There was a positive and open culture.
- The registered manager and staff demonstrated a shared vision to provide the best care for people.
- The atmosphere in the service was warm and welcoming. A relative told us, "I have found all the staff to be very obliging, polite and light hearted, I have no concerns."
- The registered manager and provider understood their duty of candour responsibilities.
- Learning had taken place in relation to how risk was managed, particularly around medicines.

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

- The registered manager had made improvements to the quality and safety of the service. For example, the deputy manager monitored medication administration records to ensure medicines were administered safely.
- The registered manager and provider had implemented an action plan to introduce safe processes for staff to follow. They focused on identifying areas of improvement and had taken action in response to audit findings.
- Care staff were aware of their responsibilities and attended staff meetings and training as required.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People, relatives and staff had confidence in the registered manager and found them to be approachable. A resident told us, "If I had any concerns I would go to [Name of registered manager], I have always found them to be very pleasant, they are really good." Another said, "I know the manager well, they are very approachable."
- The registered manager held regular meetings with people and sent out questionnaires to find out their views and improved the service in the way people wanted. A resident told us, "I have attended meetings and filled out questionnaire's, and they sort out any issues."
- Staff told us they were very motivated and felt respected, valued and supported. A member of staff told us "We can always offer our opinions on improvements and they are followed up."

- Management worked in partnership across their provider group and with the local authority and commissioners.