

St Philips Care Limited

# Ridgeway Care Centre

## Inspection report

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## Ratings

Overall rating for this service

Requires Improvement ●

Is the service well-led?

**Inspected but not rated**

# Summary of findings

## Overall summary

This unannounced inspection was carried out on 7 November 2019. Ridgeway Care Centre provides personal and nursing care for people. On the day of the inspection visit there were 22 people using the service.

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

People received care from a provider who was effectively using their quality monitoring processes to improve the care they provided. Systems were in place to ensure the quality of the service was monitored and there were improvements in the care people received because of the quality monitoring processes now in place.

Rating at last inspection

The last rating for this service was requires improvement (published 21 August 2019) when there were breaches of regulations. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

Following our last inspection, we served a warning notice on the provider and the registered manager. We required them to be compliant with Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 by 16 August 2019.

Why we inspected

This was a targeted inspection based on the warning notice we served on the provider and the registered manager following our last inspection. CQC are conducting trials of targeted inspections to measure their effectiveness in services where we served a warning notice. The provider completed an action plan after the last inspection to show what they would do and by when to improve the governance of the service. We undertook this targeted 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 governance of the service. The overall rating for the service has not changed following this targeted inspection and remains requires improvement. This is because we have not assessed all areas of the key questions.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Ridgeway Care Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

# The five questions we ask about services and what we found

We always ask the following five questions of services.

## Is the service well-led?

Action had been taken to improve this aspect of the service.

Inspected but not rated

# Ridgeway Care Centre

## **Detailed findings**

### Background to this inspection

This inspection was done to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 30 April and 1 May 2019 had been made. We inspected the service against one of the five questions we ask about services: Is the service well led? This is because the service was not meeting some legal requirements. The inspection was undertaken by one inspector.

The service had a registered manager in place at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Prior to our inspection we reviewed information we held about the service. This included the previous inspection report, information received and statutory notifications. A notification is information about important events which the provider is required to send us by law.

During the inspection we spoke with the four people who used the service two members of staff the deputy manager, the registered manager and the regional manager.

We considered information contained in some of the records held at the service. This included four care plans, risk assessments, medicine records and the records kept by the registered manager as part of their management and auditing of the service.

# 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 as we have not assessed all of this key question area. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice. Enough timely action had been taken and the provider was no longer in breach of Regulation 17 (Good Governance) in this key question.

The remaining breaches found at our last inspection will be reviewed at our next scheduled inspection. This is to allow the provider time to embed their improvements.

Prior to this inspection this service had been inspected three times since July 2017. At each previous inspection the service was rated as requires improvement. When we inspected this service on the 22 March 2018 we found the provider was in breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Good Governance. Following this inspection, the provider sent us an action plan to show how they would address the concerns we found at that inspection.

When we revisited on 30 April and 1 May 2019 we found the provider was in continued breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, and they had failed to meet the actions identified in their action plan. We identified several shortfalls in the way the service was managed. The provider had audits in place which monitored the quality of care provided. However, they had failed to use this information effectively to stop the decline in the quality of care provided.

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

- At our last inspection the registered manager had only just started in post and had not registered with the CQC. However, she has since registered with CQC. Together with the deputy manager and regional manager the registered manager had worked on an action plan to improve how the quality monitoring processes in place were used to effectively raise the standards of care for people.
- Both the registered manager and deputy manager worked together to ensure when audits highlighted issues of concern, the issues had been dealt with. Improvements in medicines management, environmental issues and the quality of information in people's care plans were seen. Action plans showed when highlighted concerns had been addressed and by whom. People's nutritional needs were clearly monitored and the registered manager had oversight of these needs to ensure appropriate care for people.
- There was also clear oversight of the audits and action plans from the regional manager who worked with the registered manager and provider to address issues in a timely way. The provider had addressed issues which had impacted on staff being able to effectively use the electronic care plan system, by improving the Wifi system so staff could record in real time when care had been delivered to people.

- Staff told us they felt supported by the management team and the registered manager had an open door policy. Staff received regular supervision and training relevant to their roles. One member of staff told us the deputy manager had been very supportive with their administration of medicines training and this had resulted in them feeling competent and confident in their role.