

Caresure Limited

Ravenstone Care and Rehabilitation Home

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Ravenstone Care and Rehabilitation Home is a residential care home providing personal care for up to 14 people, some of whom are living with mental health or dementia needs. There were 13 people living at the home at the time of this inspection.

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

People said they liked living at this home and the staff were friendly. They said their independence was encouraged. Relatives said it was "small and personalised" and had a welcoming atmosphere.

All the people and relatives we spoke with felt the home was safe and comfortable.

There had been improvements to the way medicines were managed and a commitment to checking these continued to improve. Risks to people's health and safety were assessed and minimised.

People said there were enough staff to support them when they needed it. Safe recruitment practices had been used to make sure new staff were suitable. Staff had practical training in infection control. They followed national guidelines to prevent the spread of infection and to make sure the home was hygienically clean.

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

People and relatives said the home was well-run and described the registered manager as open and approachable.

Due to the pandemic, quality assurance checks and audits had not progressed as much as intended. Further work was needed but the provider and registered manager were committed to continuous improvement. We have made a recommendation about this.

Staff had mixed views about the way the home was managed. The provider was aware of this and was taking steps to address this.

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 7 April 2020) and there were two breaches of regulation. 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. However, further action was needed with regards to the auditing of the service to ensure that the improvements which were being made were sustained.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 11 November 2019. Breaches of legal requirements were found. The provider completed an action plan after that inspection to show what they would do and by when to improve safe care and treatment and good governance.

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 Ravenstone Care and Rehabilitation Home 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?

Requires Improvement ●

The service was not fully well-led.

Details are in our well-led findings below.

Ravenstone Care and Rehabilitation 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.

Service and service type

Ravenstone Care and Rehabilitation 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

We gave a very short period notice of one hour before the inspection. This supported the home and us to manage any potential risks associated with COVID-19.

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 health professionals who work with the service. We used all of this information to plan our inspection. 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.

During the inspection

We spoke with six people who used the service about their experience of the care provided. We also spoke with the registered manager and deputy manager. We contacted four relatives by telephone and invited 10 staff to send us their views.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at staff records in relation to training and recruitment and training.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

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. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection the provider had not always made sure that risks to people's health and safety were assessed. 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.

- The service had systems in place to protect people from avoidable harm. Risk assessments had improved. These now set out the individual risks to each person and the strategies used to minimise these.
- People were fully involved in their own risk assessments and signed these to show their agreement. Staff understood where people required support to reduce the risk of avoidable harm without compromising their independence. For example, if people went out independently.
- The registered manager had put in place extra risk assessments about each person's risks relating to coronavirus. For example, what additional guidance they would need if going outside during the pandemic.

Using medicines safely; Learning lessons when things go wrong

At our last inspection the provider had not always managed people's medicines in line with safe practice. 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.

- There had been improvements to the way medicines were managed. The registered manager had developed a medicines profile for each person so staff had clear information about each person's medicines.
- Instructions were now in place about 'when required' medicines.
- Some minor points about medicine records were discussed. The registered manager was setting up new checks to support staff to record medicines in a consistent way.

Systems and processes to safeguard people from the risk of abuse

- The provider had systems in place to protect the people who lived there.
- People and relatives said the home was a safe place for people to live. Their comments included, "Yes, it's safe. I've been living here a while and I like it", "[Person] feels safe and settled here" and "It's so much safer here for [person]."
- Staff had training and guidance about safeguarding adults. They understood their responsibility to report

concerns and were confident that these would be acted upon.

Preventing and controlling infection

- The service followed the latest national guidelines relating to the prevention and control of infection. There was personal protective equipment (such as aprons and gloves) readily accessible for staff around the building.
- People and relatives said the staff worked hard to prevent infection. They commented that the home's safe measures meant there had been no cases of coronavirus.
- Staff received regular training in infection prevention and control. During the pandemic they had also recently received additional training from health protection specialists.

Staffing and recruitment

- There were enough staff deployed to meet people's needs. People told us, "Staff are always around to help if we need it."
- The provider kept staffing arrangements under review to make sure people received safe care.
- The service followed safe recruitment practices to check new staff were suitable.

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 remained the same. This meant the service was not always consistently well-led.

At our last inspection recording and quality assurance systems were not sufficiently robust to make sure the service was effectively managed. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Improvements had been made and the provider was no longer in breach of regulation 17. However, further improvements were needed.

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

- Since the last inspection some records and systems had been improved but auditing processes were not always in place to make sure these improvements were embedded. The provider and registered manager were mindful that some auditing processes had not progressed as much as planned. This was due to unexpected time taken to manage the home during the pandemic.
- A new system of medicine audits was about to be introduced but had not yet been commenced. This was important as there needed to be a demonstrable record of any errors or trends identified and how these were addressed to improve practices.
- Staff had mixed views about their engagement with the management team. Some were positive about the management style, whilst others felt excluded and said morale was low. The provider had enlisted an employment specialist to impartially address any staff grievances. This was important as staff disharmony could impact the psychological well-being of people who use the service.

We recommend that the provider and registered manager continue to implement quality assurance systems to drive continuous improvement.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People and relatives said the care was personalised and their individual level of independence was encouraged. Relatives said people's well-being and independence had improved "leaps and bounds" since moving to the home.
- People and relatives said the service put people first. Their comments included, "It's a very caring and professional service" and "Staff are able to give [person] the best possible life."

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

- People said they could speak openly with the registered manager at any time. Their comments included, "If I'm not happy I can tell [registered manager] and she listens to me" and "[Registered manager's] door is

always open and she talks with us."

- Relatives said the registered manager and staff team were very approachable. A relative commented, "We're really pleased with the way [registered manager] runs it. She has always kept us in touch with what's happening."
- The registered manager had begun to invite staff members to take on 'champion' roles within the service. These staff would have designated responsibilities for carrying out quality assurance checks as part of the governance of the service.

Continuous learning and improving care; 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 provider was committed to continuous improvement of the service for the people who lived there.
- The registered manager was aware of the duty of candour and their legal responsibility to be open and honest.

Working in partnership with others

- The service liaised with health and local authority professionals to achieve positive outcomes for the people who used the service.
- The registered manager networked with other care services to share best practice.