

Mrs Linda Paterson

Ravenscroft Care Home

Inspection report

116 Warwick Road
Carlisle CA1 1LF
Tel: 01228520748
Website: www.example.com

Date of inspection visit: 27/12/2014
Date of publication: 06/02/2015

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 

Overall summary

This announced inspection took place on 27 December 2014. We carried out this inspection at short notice because we needed to check that the registered manager would be available to speak with us at the time of our visit. During our previous inspection visit on 26 November 2013 we found the service met all the national standards we looked at. Since then there has been no incidents or concerns raised that needed investigation.

Ravenscroft Care Home (Ravenscroft) is registered to provide accommodation and care for up to three older people with a variety of different and complex needs.

Ravenscroft is a family run home with the registered manager and one other family member providing the support required to meet the assessed needs of the people they support.

The home had a registered manager in post on the day of our inspection visit. 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 and associated Regulations about how the service is run.

Summary of findings

There were two people living in Ravenscroft on the day of our inspection and we were able to spend time with both of them. We also contacted family members in order to ask their opinion of the care and support provided. The people who lived in Ravenscroft had limited verbal communication but we were able to speak briefly to them and observe their interaction with the registered manager and other care staff. They were able to tell us they were happy and felt safe living in the home.

Care records identified people's care and support needs and we saw evidence people's care was regularly reviewed. People's care records contained detailed information about their personal preferences and social histories.

We people being treated with affection and respect and support was given with empathy making sure dignity was preserved at all times.

We saw that the people who provided the support had completed training appropriate to their responsibilities within the service.

Medicines were handled well and we saw people received their medicines on time and in line with their prescriptions.

Peoples' nutritional and hydration needs were being met. In addition, there was evidence of people being visited by a range of external health care professionals, which demonstrated people's health care needs were being met.

Summary of findings

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. The registered manager understood the importance of keeping people safe and had completed Protection of Vulnerable Adults training.

The medicines administration records were clearly presented to show the treatment people had received and where new medicines were prescribed these were promptly started.

People had been fully assessed prior to moving in to Ravenscroft. Risks were identified and regularly monitored.

Good



Is the service effective?

The service was effective. People were supported by a staff team that had the appropriate experience and skills to meet all their assessed needs.

Before people came to live in this home an in-depth assessment of their needs was completed. Reviews were completed with external health and social care professionals.

There was evidence to show that the manager and staff worked closely with other agencies so that people's health, physical and emotional needs were met.

The registered manager was aware of the implication of the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards and was in the process of arranging training in this subject.

Good



Is the service caring?

The service was caring. During our visit we saw that people were treated with respect and warmth. People were relaxed throughout our visit and told us they liked the staff very much.

People had lived in this home for many years and knew the people that supported them very well.

The provider had procedures in place to ensure end of life care was provided in the most appropriate manner.

Good



Is the service responsive?

The service was responsive. We saw people had freedom of choice about how they could spend their days. Sometimes people who lived in the home went out during the day whilst at other times they sat in the lounge or in their room.

People were fully assessed prior to admission. Risks were identified and measures were in place to minimise any risk to people living in Ravenscroft.

The registered manager worked well with external agencies to ensure people received care in a consistent way.

People were supported to maintain relationships with family or friends. Relatives told us they were always made to feel welcome when they visited.

Good



Is the service well-led?

The service was well led. There was a registered manager employed in the home.

Good



Summary of findings

The registered manager, who was also the registered provider, had operated the service for many years and provided a stable environment for people living in Ravenscroft.

Visitors told us they were able to raise any concerns they had and knew they would be listened to.

The registered provider monitored the quality of the care provided on a daily basis through conversations with the people who lived in Ravenscroft, their families and external health and social care professionals.

Ravenscroft Care Home

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 27 December 2014 and was announced. The provider was given 48 hours' notice because the service was a small care home for adults who are often out during the day; we needed to be sure that someone would be in. The inspection team consisted of one inspector.

Prior to the inspection visit we gathered information from a number of sources. We looked at the information received

about the service from notifications sent to the Care Quality Commission by the registered manager. We did not receive a provider information return prior to our inspection as the registered manager had been unable to trace receipt of this form. A provider information return is a form completed by the registered manager outlining details about the service and the care and support provided.

During our visit to Ravenscroft we spent time with and spoke to both of the people living in the home. We spent time with the registered manager, looked at care records and records of medicines administration. We were able to observe the interaction of the people who lived in Ravenscroft with the staff.

We looked at the environmental standards in the home including residents' rooms, with their permission.

Is the service safe?

Our findings

During our visit we were able to speak to both of the people who lived in Ravenscroft to ask if they felt safe. Although they had limited verbal communication they were able to tell us they were happy and felt safe. Our observations, during the inspection visit, evidenced people were relaxed in the company of the staff who supported them.

We spoke to relatives to ask if they had any concerns about the safety of their family member and they told us, "I have no concerns at all about the safety of my relative. The manager treats him as if he was her own. I am so pleased with the support and care he gets".

We looked at the care records of the two people living in the home on the day of our inspection visit. We could see, even though they had both lived at Ravenscroft for a number of years, a full assessment of their needs had been completed before they moved in. the registered manager told us this was an important part of the admission process as she had to make sure Ravenscroft was a suitable place and able to meet all the assessed needs.

The support/care plans we looked at contained risk assessments covering all aspects of life in the home and activities in the community. One of the people went into the community on two days a week and the risk assessments ensured they were kept safe whilst away from the service. Any changes in peoples' needs were noted and the support plan reviewed and updated.

As Ravenscroft was run very much on family lines the care and support was provided by the registered manager/provider with assistance of one other family member. Both the registered manager and the other member of staff were aware of their responsibility to keep the people in their care safe. They had completed training in safeguarding vulnerable adults and there had been no safeguarding referrals made to Cumbria Adult Services Safeguarding team.

Although the people who lived in Ravenscroft had complex needs there had been no incidents of behaviour that would challenge the service and put other people at risk.

We looked at the procedure in place for the administration of medicines and found the records were correctly completed and up to date. Medicines were received from the pharmacy in a monitored dosage system and administered by the registered manager. Training in safe handling of medicines had been completed by the registered manager and the other member of staff.

We looked briefly at the environment and found there were no hazards that would cause problems for the people who lived in Ravenscroft. Accommodation was provided in single bedrooms with en-suite shower facilities. There was also a communal bathroom to use when people preferred to take a bath. All the communal areas were at ground floor level.

Is the service effective?

Our findings

During our inspection visit we saw people given choices about what they wanted to do and where they wanted to spend their time. People were free to move around the home as there were lots of communal areas to sit in. They also spent time in their rooms if they wished. We saw people were asked what they wanted to eat and drink. The registered manager told us that people liked to go shopping for food and they chose what they like to eat and drink. Preferences, likes and dislikes were recorded on the care plans.

Some of the people needed assistance with their meals and we observed this during the lunch time. we saw assistance was given discreetly

We discussed staff training with the registered manager and despite the staff team being so small we saw that training had recently been completed in moving and handling, first aid and safe handling of medicines. The registered manager told us they often joined the staff at another care home close by for training because

Ravenscroft only had the registered manager and one member of staff currently providing support to people who lived in the home. This practice had been in place for a number of years and had worked very well.

We discussed training in the Mental Capacity Act and the registered manager confirmed that they had completed training in this and was currently looking at training in Deprivation of Liberty Safeguards (DoLS). She understood that people who lived in a care home could be deprived of their liberty but this should only be done correctly and to keep people safe.

Health care needs were met by the local GP practice and the registered manager confirmed the service was well supported by the doctors that visited the home. Dental care, chiropody and optical care were accessed regularly and visits to practitioners and doctors were recorded in the care plans.

Following our visit we were able to speak to two relatives to ask what they thought of the support the registered manager and staff provided. We write further about this later in the report.

Is the service caring?

Our findings

We saw caring and affectionate interactions during our visit to Ravenscroft. The people who lived in the home had done so for a number of years and, from our observations, it was obvious they were relaxed and happy in their environment.

The people who lived at Ravenscroft could not easily express their views about the care they received. We observed they were treated with respect and given the time they needed to communicate their wishes. We saw that the staff understood what people wanted and treated them with affection and understanding. Staff acted appropriately and understood the personal, health and emotional needs of people in the home.

The registered manager told us that, currently, they did not need to use an advocacy service to assist people who lived in Ravenscroft as both of them had relatives who were very involved in their care and support.

Following our inspection visit we were able to speak to two family members on the telephone to ask for their opinions about the support provided by the registered manager and the care staff. All their comments were very positive and included, “The care at Ravenscroft is brilliant and Linda (registered manager) deserves a medal for her kindness to my relative” and “I consider the manager to be a friend and visit the home every week. The care extends to me as well as to my relative”. Other comments included, “The people have been on some wonderful holidays, Canada and Cuba but can’t go so far now” and “I don’t know what I would have done without the care shown by the manager and staff”.

Throughout our visit we saw staff protected people’s privacy and dignity. The registered manager ensured people were dressed properly and appropriately. People were encouraged to be as independent as possible and allowed to make their own decisions in their own time. Staff were responsive to people’s needs throughout our inspection visit.

Is the service responsive?

Our findings

During our visit we saw that the support provided by Ravenscroft was flexible and appropriate to meet the needs of the people who lived there.

People who lived in Ravenscroft had an individualised plan of care based on the original assessment of needs made when they came to live in the home. Each plan contained sufficient information to ensure people received the care and support applicable to meet all their needs. We saw that each support plan had a personal life history which ensured the care provided was holistic and covered every aspect of the person's lifestyle. We saw on the support plans there were management plans and protocols in place to deal with more complex needs such as diabetes, having a pacemaker or epilepsy.

Care plans were reviewed regularly to ensure they remained up to date and gave the staff accurate information about managing any changes required to meet the increase in personal and emotional needs. The care and support of the people who lived in Ravenscroft had recently been reviewed by an external social care professional. We were able to read details of the reviews which covered all the attributes of the care and support required to ensure Ravenscroft continued to provide the most appropriate care and support. The conclusion of the reviews indicated that Ravenscroft continued to be the most suitable place for people to live.

The personal preferences of the people who lived in Ravenscroft were always given priority and this was confirmed by the registered manager who had cared for them for many years. Observations during our visit also confirmed this. We saw on the support plans personal preferences were documented clearly and gave staff sufficient information to provide the care and support in a way that was acceptable to each person.

Activities were provided in accordance with peoples' abilities to take part and enjoy. One of the people went out two days a week and enjoyed time in the community. Other activities were limited to what each individual wanted to do. Ravenscroft had some outdoor space that people could enjoy during the summer months and outings in the care were enjoyed by all.

At the time of our inspection visit there was no need for equipment to assist people's mobility. However the registered manager confirmed that if there was need for such equipment this would be organised as soon as necessary.

When we spoke to relatives we asked if they had ever had the need to complain about anything. All those we spoke said, "I have never ever had the need to complain about anything. The care is so good and I am consulted about every aspect of my relative's care". The registered manager confirmed that communication between the staff, the relatives and external health and social care professional were good which helped to ensure there was seamless care and support at all times.

Is the service well-led?

Our findings

There had been the same registered manager in post since the Ravenscroft opened and the people currently supported had lived in the home for many years. The registered manager provided all the care with the help of one other member of staff and we saw she had very high standards in the care and support provided.

We asked relatives if they considered the service was well run and we received the same answer from the two we spoke to. The said, “You would not find a better run home anywhere at all. The manager goes out of her way to care for my relative as though they were her own family. Mind you she looks on the people she cares for as her own family anyway”.

We saw people were as involved in the running of the home as they were able. Although this involvement was limited to people’s ability nevertheless we saw their involvement during the time we were in Ravenscroft.

Monitoring the quality of the service provided was very much personal and on-going as the registered manager kept in close contact with family members and external health care professionals. Lines of communication were good and always open and the registered manager told us she was constantly looking for ways to improve the support particularly as peoples’ needs increased.

Details of any accidents or incidents are recorded in peoples’ care plans together with any action taken. Risk assessments and quality checks were in place these covered all aspects of the running of the home and activities in the house and in the community.

Leadership within Ravenscroft was very much shared between the registered manager and the other member of staff. They both worked together to ensure the most suitable care and support was provided at all times.