

Ravensdale Health Care Limited

Ravensdale

Inspection report

Naburn Walk
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Leeds
West Yorkshire
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Tel: 01132739620

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23 January 2023

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28 February 2023

Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service well-led?	Good ●
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Summary of findings

Overall summary

About the service

Ravensdale is a residential care home providing accommodation for people who require personal and nursing care for up to 23 people. There were 18 people using the service at the time we inspected. The service provides support to people with dementia, mental health needs and physical disabilities.

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

There were enough staff to provide people with safe care. People were safe from the risk of abuse and relatives told us they felt their loved ones were safe. Risks to people were appropriately assessed and managed. Staff knew people well and supported people in a person-centred way. People received their medicines as prescribed.

The registered manager and provider had good oversight of the service and strived to improve the service further. The registered manager engaged well with people, relatives and staff; feedback was used to shape the service. Staff worked well with other professionals.

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.

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 good (published 11 March 2022).

Why we inspected

We received concerns in relation to the safety and governance of the service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has not changed based on the findings of this inspection. Please see the safe and well-led sections of this full report.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for

Ravensdale on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Ravensdale

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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by 2 inspectors 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

Ravensdale is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us.

Ravensdale is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed the information we had received about the service since the last inspection. We sought feedback from stakeholders, this included the local authority, commissioners and Healthwatch.

Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 3 people who use the service and 5 relatives about their experience of the care provided. We spoke with 6 staff members including carers, nurses and the registered manager. We reviewed a range of records. This included 4 people's care records, medication records and health and safety records. We looked at 3 staff files in relation to recruitment, induction and supervision. We reviewed records relating to the management of 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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safe and protected from the risk of abuse.
- People told us they felt safe and relatives felt assured that their loved ones were safe. One relative told us, "[Relative] is more than safe, it's absolutely fantastic as far as I'm concerned. They treat [relative] like a member of the family." Another relative told us, "Yes, [relative] is safe – the carers are really good."
- Staff had completed safeguarding training and knew what actions to take to safeguarded people. One staff member told us, "Safeguarding is a strategy we take to prevent any harm and if there is any harm happening we respond to this."

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- There was enough staff to keep people safe. Relatives were assured that a regular team supported their loved ones. One relative told us, "It's mostly the same staff which helps the residents." People spoke positively about the staff. One person told us, "I like the staff, especially [name of staff member]. I get on with all of them. They are kind to me. They look after me."
- Safe recruitment procedures were in place. The provider carried out appropriate pre-employment checks to ensure suitable staff were working at the service.
- Staff worked as a team to make sure everyone received timely support.

Using medicines safely

- Medicines were managed safely.
- People received their medicines as prescribed. One relative told us, "The nurse used to make sure

[relative] had them, [relative] was given them one at a time and they made sure [relative] had taken them."

- Staff had completed medicines training and their competence to administer medicines safely was regularly assessed.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

The home ensured visits were in line with government guidance.

Learning lessons when things go wrong

- The provider had a robust system in place to record and analyse incidents. Learning was identified to support improvements.
- There was a positive culture which encouraged staff to report any safety concerns. Staff knew how to respond to incidents. One staff member told us, "We have to make sure the residents are safe and then follow any protocols."

Assessing risk, safety monitoring and management

- Risks to people were assessed and managed.
- Care plans were in place, but some lacked detail and service user involvement. The registered manager told us they were in the process of updating care plans to include more detail.
- Regular meetings were held to discuss risk related issues within the service.
- Maintenance of the building and health and safety checks were up to date.

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 our last inspection we rated this key question good. The rating for this key question has remained good.

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

- The service was well-led and promoted a person-centred culture.
- The service was inclusive. We observed a staff member supporting a person using signs and symbols which was their preferred method of communication.
- Relatives did not feel the service could be made better in any way. One relative told us, "My mind is at rest now and I don't need to worry as Ravensdale has a warm and caring environment."

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

- There were robust governance and quality tools in place for monitoring performance and the registered manager had good oversight of the service.
- There were regular meetings at the -service which staff found effective. One staff member told us, "We have monthly and daily handovers which is good. We don't only discuss the day; we talk about service users that we are concerned about and proud of."
- Relatives felt confident in the leadership of the service. One relative told us, "I believe they are leaders in their field. It's reassuring for me as I get older that [relative] is here – [relative] is safe and secure now and well looked after."

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

- The registered manager regularly sought feedback from relatives and staff and acted on this. One relative told us, "I have had a questionnaire and had a meeting with [the registered manager] once or twice."
- The registered manager had formed positive relationships with relatives. The registered manager was described as, "approachable." One relative told us, "I didn't have to book a visit I could just pop in which says a lot. They go above and beyond. My [relative] also said it was a good home."
- The service worked closely with other health and social care professionals to ensure people received consistent and timely care. One health professional told us, "It's really positive here. Whenever I book to come, they respond immediately. They always know I'm coming. They always give me the information I need." One staff member told us, "Everyone works well with each other in-house and with other professionals."

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

- There was a clear culture of learning promoted by the registered manager.

- We received feedback about the service from stakeholders about the service. They told us, "The [registered] manager, is really proactive and has linked in with us on numerous occasions to arrange training for the staff."
- Feedback from a recent survey completed by relatives and people was positive. The registered manager presented with a willingness to improve and had devised an action plan to further improve the home.
- The registered manager understood the duty of candour and was honest throughout the inspection, this presented us the willingness to engage and improve the service.