

Redholme Memory Care Ltd

Redholme Memory Care Limited

Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Redholme Memory Care Limited is a residential care home providing personal and nursing care to up to 55 people. At the time of our inspection there were 51 people using the service. The service provides support to older people who live with dementia. People are accommodated across three separate wings, each of which has separate adapted facilities.

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

Improvements were needed to ensure any shortfalls in the quality of care which could place people at risk were routinely identified through a more robust system of auditing and daily recorded checks. The registered manager needed to support the wider management team to fully understand their roles and responsibilities where tasks were devolved.

Areas of the service were tired in appearance and in need of refurbishment. Despite this, the home was visibly clean. A programme of refurbishment was planned and underway.

People spoke positively of the care they received at Redholme Memory Care Limited and they were supported by staff who knew them well. Support to people was delivered in a caring and patient manner. People were comfortable in the presence of staff and positive relationships had developed. There were enough staff on duty to meet people's needs and staff told us they felt well supported.

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

The last rating for this service was good (published 12 February 2020).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 Redholme Memory Care Limited on our website at www.cqc.org.uk.

Enforcement

We have identified a breach in relation to good governance at this inspection. Please see the action we have told the provider to take at the end of this report.

Follow up

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. 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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Redholme Memory Care Limited

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

This inspection was carried out by 2 inspectors.

Service and service type

Redholme Memory Care Limited 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. Redholme Memory Care Limited 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 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. 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 6 people who used the service and 8 family members about their experience of the care provided. We also observed interactions between staff and people who used the service.

We spoke with 11 members of staff including the registered manager, members of the management team, the receptionist, nursing staff and carers.

We reviewed a range of records. This included 7 people's care records and multiple medication records. We looked at 6 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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. At this inspection the rating has changed to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Assessing risk, safety monitoring and management

- The management of risk to people was not always sufficiently robust.
- Care plans had been developed to mitigate risk to people's health and wellbeing, however, on the first day of the inspection we found a small number of risk assessments needed to be updated or completed. This was immediately rectified once raised with the management team. There was no evidence people had experienced any negative impact and feedback from family members supported this. Comments included, "Staff monitor [Name's] weight regularly" and, "I can sleep knowing [Name] is okay. She is happy."
- Staff were knowledgeable and able to describe people's care needs. Throughout our inspection, we observed safe working practices, such as moving and handling being carried out.
- Routine checks on the environment and equipment were up to date and certificates were in place to demonstrate this.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Systems were in place to protect people from the risk of abuse and there was a system in place to record accidents and incidents. However, accidents and incidents were not always reviewed in a way which enabled the management team to analyse trends and identify themes. This meant we were not always assured accidents could be avoided. Following a discussion with the registered manager, improved systems were introduced to address this.
- We were assured referrals had been made to the local authority safeguarding team when abuse had been suspected and appropriate investigations had been completed.
- Staff received training and understood the actions they must take if they felt someone was being harmed or abused.
- People told us they received safe care and felt secure living at Redholme Memory Care Limited. Comments included, "The care staff are very nice. Very helpful. I like it here" and, "I visit 5-6 times a week. Staff are always checking on [Name]" and, "I have often visited without notice. I have never had any concerns."

Staffing and recruitment

- Staff were safely recruited. Appropriate checks had been made before being offered employment however the records in place were not always readily available and stored in different files. This made it difficult at times to easily review staff records. We raised this and the quality manager introduced new systems to address this.
- Staffing levels were safe. There were enough staff on duty to meet people's needs. We observed staff were attentive and available to meet people's needs on each day of our inspection.

- People told us there were enough staff. A family member told us, "I certainly think there is enough staff. Always someone coming in, round and about." A person who used the service also commented, "They are nice people and it is always well staffed."

Using medicines safely

- Medicines were safely managed. Records of administration were maintained and in line with best practice.
- In a small number of records, we identified some shortfalls in the records relating to prescribed medicines administered on an 'as required' basis. This guidance helps staff to understand why certain medicines were prescribed; and under what circumstances they should be offered to a person. We raised this and it was addressed by the deputy manager.
- Medicines were stored securely and only administered by staff who were suitably trained.

Preventing and controlling infection

- Areas of the service needed refurbishment to ensure safe and hygienic standards were maintained. Improvements to bathrooms were needed. During our inspection contractors were on site and were undertaking this work to improve the facilities available to people.
- Other systems to prevent and control infection were appropriate. Systems were in place in the event of an outbreak of an infectious illness at the home.
- The provider was enabling visiting in line with government guidelines.

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.

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. At this inspection the rating has changed to requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- Audits and daily checks to monitor standards and to identify where improvements could be made were not always effective. Issues we found at this inspection with risk assessments, staff recruitment files, shortfalls in medicines and a lack of analysis of accidents and incidents had not been identified through the providers systems.
- During the COVID-19 pandemic the registered manager had devolved some responsibilities across the management and nursing team. We found the registered manager understood their responsibility for notifying the Care Quality Commission of events that occurred within the service, however this had either not been fully shared, or understood by those people to whom this has been devolved. This meant some statutory notifications had not been submitted to CQC as required.
- We discussed the lack of notifications and auditing systems with the registered manager and checked to ensure other agencies had been informed of any significant events or changes in conditions which could impact on people. We found all other necessary agencies had been informed.

Systems were either not in place or robust enough to assess, monitor and improve the quality and safety of the service or mitigate the risks relating to the health, safety and welfare of people. This placed people at risk of harm. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The deputy manager took immediate action to reviewed recent events and made appropriate notifications which were required. The registered manager and the providers quality manager also updated the auditing systems to make the checks more robust.

- The rating from the last inspection was displayed in the main reception area.

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

- We observed a positive culture and caring practices throughout our inspection. People were not rushed when being assisted and staff took time to sit and talk to people.
- People living at Redholme Memory Care Limited told us they were happy living at the service and received person-centred care. We were told, "It's alright here. [Staff name] is a good lad. He's a case" and, "The helpers are lovely. Always here to help."

- Family members also said they were happy with the quality of care people received and felt staff knew people well. Comments included, "It's great, staff are brilliant," "The Management are smashing" and, "Staff on the whole are unbelievably empathetic and exceptionally kind."
- Staff we spoke with told us the management team was very supportive and felt confident in sharing any concerns.

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

- Family members told us they were consulted about issues relating to people's care and updated with any changes. A family member told us, "We are very happy. They [Staff] are so caring and have time for everybody."
- Friend and family meetings were planned for the coming year.
- Staff felt engaged and felt they worked as a close team. Comments included, "I enjoy working here. Its like my family" and, "I love it here."

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; Working in partnership with others

- The registered manager demonstrated an understanding of their responsibilities under duty of candour.
- Information contained within care plans and through other records demonstrated the staff at Redholme Memory Care Limited worked in partnership with other agencies.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA RA Regulations 2014 Good governance
Treatment of disease, disorder or injury	Systems were either not in place or robust enough to assess, monitor and improve the quality and safety of the service or mitigate the risks relating to the health, safety and welfare of people.