

Ravenscroft Rest Home Limited

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Ravenscroft Rest Home Limited is registered to provide accommodation and personal care for up to 34 older adults who require support with their personal care needs. At the time of the inspection there were 27 living at the home.

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

Staff kept the building clean and tidy and maintenance checks were in place and up to date. Recruitment procedures were in place and were applied in line with their policy. There were sufficient staff to care for people. Safeguarding training was provided annually and updated. Staff were aware of the processes to follow to enable people to be safe. Risks were assessed in detail and monitored to ensure individuals safety and promoted their independence within a risk framework. People received their medicines safely.

The registered manager had a training programme to support staff to improve their skills and knowledge. One staff member said, "The training is first class, and the manager supports us always to attend courses to improve." People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice. Systems to reduce the risk of malnutrition and monitor people's food and drink were in place. We received positive comments about the quality of meals at the home. One person said, "We have a good cook and lots of homemade food."

The management team had auditing systems to maintain ongoing oversight of Ravenscroft and an efficient management team provided oversight and guidance for the service. Quality assurance processes ensured people were able to give their views of the service. A relative said, "They were all very approachable and kept us in the know about [relative's] condition and care."

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 at this service was good (published 19 October 2018.)

At our last inspection we recommended that the provider ensure their mandatory training schedule for all staff was up to date. At this inspection we found the provider had acted upon the recommendation immediately after the previous inspection.

Why we inspected

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

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 effective?

Good ●

The service was effective

Details are in our effective findings below

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Ravenscroft Rest Home 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 Care Act 2014.

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 1 inspector.

Service and service type

Ravenscroft Residential 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. 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.

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

Notice of inspection

This inspection was unannounced. The inspection activity started on 22 November and ended on 24 November 2023. The site visit was on 22 November 2023.

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 commissioners who work with the service. We also looked at information we had received and held on our system about the home, this included notifications sent to us by the provider and information passed to us by members of the public. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 5 people who lived at Ravenscroft, 2 relatives, 6 members of staff, the registered manager and provider. In addition, we spoke with 2 health professionals who were visiting the home at the time of the visit. We observed staff interaction with people, also, we reviewed a range of records. These included care records of people, medication records, and 2 staff files in relation to recruitment. We also reviewed a variety of records relating to the management of the service. We had a walk around the premises and looked at infection control measures.

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 good. At this inspection, this key question has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The management team assessed risks to ensure people were safe. Staff took action to mitigate any identified risks. Identified risks were recorded and regularly reviewed to keep people safe.
- The registered manager and staff promoted positive risk taking to help people gain skills and live an independent life as possible. One person said, "I feel really safe here the staff are fantastic and it's like home. They leave me to do things as much as I can on my own."
- Checks were in place to ensure equipment remained safe. Fire risk assessments were in place and regular fire drills were completed. This was to ensure people knew the processes to follow in the event of a fire emergency.
- The management team discussed accidents and incidents with staff as part of lessons learned, to ensure risks were assessed to prevent reoccurrence where possible.
- People and staff told us the registered manager had created a culture where staff and people were open and honest when things went wrong.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and confident with staff that cared for them.
- There were effective safeguarding processes in place. The management team and staff had a good understanding of safeguarding. They understood their responsibilities for keeping people safe and the processes for reporting any concerns.
- Training in areas of safeguarding adults for staff was provided and updated in a timely way. Records looked at confirmed this.

Staffing and recruitment

- Sufficient staff were deployed to ensure people were cared for. One person said, "If I press for help, they are here soon enough. You never have to wait long there are always plenty of staff."
- Staff recruitment processes were good and thorough. Records looked at confirmed all checks had been completed prior to staff commencing work.

Using medicines safely

- Records for the receipt, administration and disposal of medicines were kept. There were written protocols to guide staff on the administration of medicines prescribed 'as and when' required. People received their medication safely by trained staff.
- Auditing processes to monitor medicines and identify any issues were undertaken regularly.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- We were assured that the provider had processes to admit people safely to the service.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- 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

- People were able to receive visitors without restriction, in line with best practice guidance.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was requires improvement. At this inspection, this key question has changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this

At our last inspection we recommended the provider ensured all staff received training that the provider deemed essential for the role. The registered manager and provider at the time took immediate action to address this.

Staff support: induction, training, skills and experience

- Staff were competent and knowledgeable and access to training programmes was good to ensure staff were appropriately trained. Each staff member had been provided with a training programme which was ongoing throughout 2023 and 2024. One staff member said, "We all have training schedules, and the manager is really keen to ensure we are all up to date with required training."
- A formal induction process was in place when staff commenced work to support staff in their role.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act 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 MCA.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA.

- Mental capacity assessments and best interest decisions were completed and recorded.
- Staff had received training and understood the relevant requirements of the MCA. Staff confirmed they asked for people's consent before providing support, explaining the reasons behind this and giving people enough time to think about their decision before taking action.
- People's capacity to make decisions was considered as part of the assessment process. We saw evidence of this in care plans.
- The registered manager was aware of the process to submit applications for DoLS authorisations, as appropriate.

Adapting service, design, decoration to meet people's needs

- Accommodation was accessible, safe and homely. Bathrooms could accommodate people who required support with moving and transferring to the bath and shower facilities.
- Some refurbishment for the premises had been completed. A relative said, "It is a really pleasant home and they keep it well."
- People were able to bring their own items into their rooms and to personalise their rooms as they wanted to. We saw good examples of this where people had put up family photographs, furniture and ornaments that were special and individual to them.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs and choices were assessed to ensure their care, treatment and support was delivered in line with current legislation, standards and evidence-based practice to achieve effective outcomes. The views of the people were also considered and written in their care records.
- People's care records reflected their current care and support requirements, and they were being reviewed on a regular basis.

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People were provided with meals of quality and choice. Comments from people included, "The food is top notch. There is always a choice, and lots of it." Another person commented, "We have good cooks and a good choice of homemade foods."
- People were supported with their healthcare needs. Staff had developed relationships with other agencies and professionals to provide a flexible and effective service.
- The registered manager had good systems to reduce the risk of malnutrition and manage people's food intake and any concerns were identified and acted upon. They continued to focus on helping people to improve their nutrition in ways that offered choice and maximised their independence.

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 good. At this inspection, this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this

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

- Staff supported people to be involved in the development of Ravenscroft. For example, 'resident' meetings were encouraged, and views shared. A staff member said, "We feel fully engaged as a staff team to contribute to the running of the home."
- People and their relatives were comfortable and confident when approaching staff and management to express their views. One person said, "We do fill in surveys to pass opinions now and then, and they do take things on board."
- People spoke well of the registered manager and staff team. One person told us, "The manager is so caring and nice nothing is too much trouble and many times we sit and chat about things."

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

- The registered manager was supported by staff who were well trained and understood their responsibilities for delivering care for people.
- The management team had established systems for monitoring the quality and safety at Ravenscroft. They were aware of their regulatory responsibilities to other professional agencies.

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

- The provider and registered manager were committed to ensuring a positive culture existed at Ravenscroft.
- The registered manager was visible in the home. They worked directly with people living and working at Ravenscroft and led by example. A relative said, "It has a family feel to the home and you can see everybody is committed to do their best for the residents."
- The management team had systems to ensure person-centred care that achieved good outcomes for people.

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 registered manager encouraged candour through openness.
- The provider had been open and honest when things went wrong.
- Staff gave honest information and suitable support, and applied duty of candour where appropriate.

Working in partnership with others

- Records showed the management team sought advice and guidance when needed from health and social care professionals.
- There had been compliments received from professionals who worked closely with the home. One health professional said, "I certainly would have no issues with a relative of mine staying here. The commitment of the staff and manager is fantastic."