

Shaftesbury Care GRP Limited

Redworth

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Redworth is a residential care home providing personal and nursing care to up to 57 people. The service provides support to adults, some of whom are living with dementia. At the time of our inspection there were 53 people using the service.

Redworth accommodates people across four separate wings, each had their own adapted facilities. One of the wings provided intermediate/short term care to support people to regain independence following a period of illness, hospital admission or following an accident.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

Medicines were administered and stored safely. However, medicines records were not always completed correctly. The provider had systems and processes in place to protect people from the risk of abuse and ensure people were safe. Where people were at risk there were suitable plans in place to inform staff how to manage these risks. The registered manager ensured all necessary checks and tests were carried out to make sure the building was safe. Appropriate precautions were taken to minimise the risk of infection and the home was clean and tidy. There were enough staff to meet people's needs and new staff were recruited safely.

The registered manager conducted regular quality checks and when issues were identified work was done to rectify them. People we spoke with felt they were involved in the service. Staff felt well supported with regular meetings, supervision and annual appraisal. People had detailed care plans in place and care was delivered in a way which took into consideration people's individual likes and dislikes. A wide variety of activities meant people were able to have a full and enjoyable life whilst at Redworth. The registered manager and staff liaised with external professionals to ensure people had access to the support they needed.

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 requires improvement (published 27 August 2020) and there were 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.

Why we inspected

We carried out an unannounced inspection of this service on 28 July 2020. Breaches of legal requirements were found. The provider completed an action plan after the last 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.

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

Recommendations

We have made a recommendation about the management of medicines.

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.

Redworth

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 1 inspector, a medicines inspector 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

Redworth 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. Redworth 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.

We also used information gathered as part of monitoring activity that took place on 29 September 2022 to help plan the inspection and inform our judgements.

During the inspection

We spoke with 6 people who used the service and 5 relatives about their experience of the care provided. We spoke with 9 members of staff including the regional manager, registered manager, deputy manager, nurses, senior care workers and care workers. We also spoke with 2 external professionals who regularly visited the service.

We reviewed a range of records. This included 7 people's care records and multiple medication records. We looked at 3 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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection the provider had failed to demonstrate medicines were managed safely. This was a breach of regulation 12 (Safe Care and Treatment) and a breach of regulation 17 (Good Governance) 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 or 17.

- Medicines were administered and stored safely. However, medicines records were not always completed correctly.
- Some people were prescribed medicines to be taken on a 'when required' basis or with a variable dose. Guidance for how these medicines should be administered was not always sufficiently detailed. The registered manager took immediate action to improve this.
- Guidance was not always clear for how often creams should be applied and some records were missing.

We recommend the provider reviews their medicines records in line with best practice guidance.

- After the inspection the registered manager confirmed action had been taken to improve medicines records and provided evidence of this.
- People and their relatives were happy with the way their medicines were administered. One person told us, "I take medications because I am a diabetic and I get them when I should take them. Staff are very good."

Systems and processes to safeguard people from the risk of abuse

At our last inspection the provider had failed to ensure robust systems were in place to demonstrate people's safety was effectively managed. This was a breach of regulation 12 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 provider had systems and processes in place to protect people from the risk of abuse. The provider's safeguarding policy was up-to-date and reviewed regularly.
- All staff had received training in safeguarding that was suitable for their roles.

- Staff were aware of the safeguarding process and told us that any concerns would be reported to their line manager or the local authority safeguarding team. One member of staff told us, "I'd be happy to whistle-blow. I wouldn't be afraid to do it as at the end of the day it's somebody's mam, nana, auntie or uncle. You have to do the right thing for people."

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

At our last inspection the provider had failed to ensure robust systems were in place to ensure people's safety. This was a breach of regulation 12 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 provider had effective systems in place to ensure people's safety. Where people were at risk there were suitable plans in place to inform staff how to manage these risks. One person told us, "I do feel safe and I feel like it is like my home now."
- The registered manager ensured all necessary checks and tests were carried out to make sure the building was safe.
- The provider had policies and procedures in place to minimise risk in the event of a fire. Staff had taken part in regular fire drills. Some staff were trained as fire marshals and this information was on display. The fire alarm system and fire-fighting equipment were checked regularly.
- Accidents and incidents were recorded and analysed to look for patterns and trends. This minimised future risk and ensured lessons were learned when things went wrong.

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.

Preventing and controlling infection

At our last inspection the provider had failed to ensure systems were robust enough to demonstrate infection prevention and control was being managed effectively. This placed people at risk of harm. This was a breach of regulation 12 (Safe Care and Treatment) and a breach of regulation 17 (Good Governance) 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 or 17.

- 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 was taking place in line with current government guidance.

Staffing and recruitment

- There were enough staff to meet people's needs and support them safely. The registered manager reviewed staffing levels regularly. One person told us, "I think there's enough staff, there's no problem at night or the weekend."
- The provider had effective recruitment processes in place. This included making sure that important information such as employment history and references had been sought. Checks were also done with the Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

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 requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted 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

At our last inspection the provider had failed to undertake sufficient quality monitoring of the service to ensure people were being protected from the risk of harm. This was a breach of regulation 17 (Good Governance) 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 17.

- The registered manager conducted regular audits and when issues were identified work was done to rectify them.
- The registered manager understood their role in terms of regulatory requirements. For example, they had notified CQC of events, such as safeguarding's and serious incidents as required by law.
- Staff told us they were clear about their role and regular supervision meetings helped with this. One member of staff told us, "The meetings are really helpful. They ask if I have any problems. I like to know if I'm going wrong anywhere. I can also raise anything I want to talk about and know they'll listen."

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

At our last inspection the provider had failed to consistently act and respond to feedback shared through concerns and complaints. This was a breach of regulation 17 (Good Governance) 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 17.

- The registered manager had a good understanding of the duty of candour. This is where we ask providers and managers to be open, honest and transparent about their service.
- The registered manager assisted us throughout the inspection, listened to the advice given and quickly acted upon any issues raised.

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

- People felt they were involved in the service. One person told us, "I have raised things and staff listen to me."
- Staff felt well supported with regular meetings, supervision and annual appraisal. One member of staff told us, "The home is a different home to when I started, it's so much better. It's all down to the management. [Registered manager] has made it loads better. I'm at home here now, it's like my home from home."
- Feedback was regularly sought from staff, relatives and people using the service. There were regular meetings and annual surveys. The manager also operated an open-door policy so people could go to them with any concerns or suggestions outside of these formal feedback routes. One member of staff told us, "[The registered manager] is totally up for listening to us and any ideas we might have."

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

- People had detailed care plans in place that were reviewed on a regular basis. We saw evidence of care being delivered in a person-centred way which took into consideration people's individual likes and dislikes. Activities staff had made great efforts to ensure people were able to have a full and enjoyable life whilst at Redworth. One person told us "I was a bit down the other week but the staff in here are angels, they really do everything they can for you. Nothing is too much trouble. I really feel like part of a family in here."
- People we spoke with knew who the registered manager was and felt they could go to them with any concerns. One family member told us, "The manager is very approachable and the opportunity for communication is constant. Any concerns are dealt with."
- Staff felt supported in their roles and spoke positively about the culture and values of the service. One member of staff told us, "100% the people who live here are well cared for. I wouldn't think twice about putting my mum in Redworth. I'm not biased because I work here, that's coming from the heart."

Working in partnership with others

- The provider engaged well with outside agencies including the local authority. We saw evidence of good partnership working.
- The registered manager and staff liaised with external professionals to ensure people had access to the support they needed. One health professional told us, "Redworth have always given us a really warm welcome and they are always keen to get involved. We know if there is a new project we are working on we can roll it out here with their full support and engagement."