

Complete Care Homes Limited

Rambla Nursing Home

Inspection report

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Scarborough
North Yorkshire
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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

Rambla Nursing Home is a nursing home providing personal and nursing care to up to 30 older people, young adults and people with physical disabilities, some of whom are living with dementia. At the time of the inspection, 30 people lived at the service.

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

People felt safe. Systems and processes were in place to ensure risks to people were assessed and their needs met. Additional measures had been put in place to protect people against the risk of Covid-19. Visiting arrangements were in place as per government guidance.

People received their medicines as prescribed by staff who had the appropriate skills and knowledge. People reported an open and honest culture where they could approach staff with any concerns. There was a sufficient number of staff on duty to support people in a timely way.

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.

Effective governance systems were in place to monitor the quality and safety of the service provided. The provider and registered manager had effective oversight of the service and actively encouraged people, relatives and staff to provide feedback and share their views. Action had been taken when any shortfalls were highlighted.

For more details, please see the full report which is on the Care Quality Commission website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 14 August 2019).

Why we inspected

The inspection was prompted in part due to concerns received about night staffing levels and risks to people not being appropriately managed. A decision was made for us to inspect and examine those risks.

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.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Rambla Nursing Home

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.

Inspection team

The inspection was carried out by one inspector. An Expert by Experience made calls to people and relatives following the inspection site visit. 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

Rambla Nursing 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.

The service had a manager registered with the Care Quality Commission. 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.

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. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We reviewed a range of records in relation to people and the support they received. We also looked at two staff's recruitment records as well as records relating to the management of the service including servicing of equipment and monitoring of accidents and incidents.

We spoke with two people who used the service, four members of staff including the registered manager, nurse and care workers.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We also contacted two people who used the service and five relatives via telephone to ask their views on the service provided.

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.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and avoidable harm and people told us they felt safe living at the service. Comments included, "Yes, I feel safe. They look after me well" and "Yes, I feel safe. Everyone is very helpful."
- Appropriate processes had been followed when any safeguarding concerns had been raised. Thorough investigations had then taken place.
- Staff were aware of the whistle-blowing policy and how to report concerns.

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

- Risks to people were assessed, monitored and recorded. Records provided staff with detailed information around how known risks were to be managed.
- Where people were at increased risk, for example due to poor skin integrity or fluid intake, appropriate monitoring documents and risk management plans were in place.
- Servicing and regular checks of equipment had been completed to ensure it was safe to use. Action had been taken when concerns had been found.
- Accidents and incidents were appropriately recorded. Data was analysed to look for trends and action was taken to mitigate risks.

Staffing and recruitment

- Safe recruitment processes were in place and followed. This ensured suitable staff were employed.
- A safe number of staff were on duty and staff we spoke with confirmed this. Staff were visible throughout the inspection and responded to people's needs in a timely manner.
- The registered manager completed unannounced checks at night to ensure night staffing levels were safe, and best practice guidance was being followed.

Using medicines safely

- Medicines were stored, recorded and administered safely. Regular audits were completed to identify any issues. Prompt and appropriate action was taken to address any shortfalls.
- People told us they received their medicines as prescribed. One person told us, "I get all my tablets when I need them. Staff talk to me about it my medication and why I need it."
- Where people were prescribed 'as and when required medicine', appropriate protocols were in place to guide staff on when to administer.
- Staff completed regular medicines training and had their competencies 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 meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

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 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

- Quality assurance processes were in place and used to monitor the quality and safety of the service provided to ensure regulations were being complied with.
- The registered manager and provider had effective oversight of how the service was being run. Audits were completed on a regular basis and were effective in highlighting concerns and areas for improvement.
- Lessons had been learnt and shared with the staff team, so staff at all levels understood the standards that were expected of them.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves 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 service has a positive culture. The registered manager had positive relationships with people, relatives and staff. Comments included, "Quite simply I cannot fault the place, I really can't" and "Everyone seems very approachable and happy to listen if I have any concerns."
- People were happy living at the service. There was a warm, welcoming and relaxed atmosphere.
- The provider was responsive to issues and concerns; they understood their responsibility to be open, honest, and apologise to people if things went wrong.

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

- Staff were encouraged to develop within their role and contribute ideas on how the service could further improve.
- The manager engaged with people, relatives, staff and other stakeholders in the running of the service. Their views were listened to and acted upon.
- Additional measures had been put in place during Covid-19 to ensure regular updates were provided to relatives, including monthly newsletters and questionnaires around effective communication. One relative said, "They have managed the situation very well. The communication and measures being taken has been very good."
- Staff had developed good partnership working with other professionals and services to ensure people received the support and treatment they required in a timely manner.