

Methodist Homes

Reuben Manor

Inspection report

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Website: www.mha.org.uk/care-homes/dementia-care/reuben-manor

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29 October 2020

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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

Reuben Manor is a residential care home providing accommodation and personal care to 50 people at the time of inspection, some of whom were living with a dementia. The service can support up to 83 people in one large adapted building.

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

People and their relatives were very happy with the care provided from staff. One relative told us about the support staff had provided to two people and their wider family whilst delivering end of life care. Their comments included, "The staff were just exceptional" and, "[person] is cared for beyond anything we could possibly hope for."

Medicines were managed safely, and the service had improved the processes for monitoring the administration of medicines. Care records were accurate and reflected the needs of people. Risk assessments were in place to help keep people safe.

Staff followed infection prevention and control policies. Due to the pandemic, additional processes and steps were taken by staff to keep people safe. Relatives told us that the service had actively engaged with them and they were assured that people were well looked after.

There was a robust quality and assurance system in place. The registered manager worked with the provider to monitor the safety and quality of care provided to people. Staff worked with other healthcare professionals to make sure people had the correct support they needed.

Staffing levels were appropriate to support people. There continued to be a robust recruitment process in place.

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 3 December 2019) and there was a breach of the regulations. 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 comprehensive inspection of this service on 30 October 2019. A breach of legal requirements was 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.

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.

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 coronavirus and other infection outbreaks effectively.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. 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 Reuben Manor on our website at www.cqc.org.uk.

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.

Reuben Manor

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

This inspection was carried out by two inspectors and an assistant inspector.

Service and service type

Reuben Manor 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

We gave the service 24 hours' notice of the inspection. This was due to the COVID-19 pandemic and we wanted to make sure the manager of the service could support the inspection.

What we did before the inspection

We reviewed the information we held about the service such as when the provider told us about serious injuries or events.

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.

We sought feedback from the local authority contracts monitoring and safeguarding adults' teams and reviewed the information they provided. We contacted the NHS Clinical Commissioning Group (CCG), who commission services from the provider, and the local Healthwatch for their feedback. 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 all of this information to plan our inspection.

During the inspection-

We reviewed documentation, inspected the safety of the premises, the arrangements for infection prevention and control, and carried out observations in communal areas. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with three people living at the service, six relatives and seven members of staff including the registered manager and care staff.

We reviewed the care records for three people, the medicine records for nine people and the recruitment records for two staff. We looked at a range of records.

After the inspection

We continued to review records from the provider to validate evidence found. We looked at training data, premises information, staffing rotas, meeting minutes and information relating to the governance 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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection the provider had failed to robustly assess the risks relating to the health, safety and welfare of people with regards to medicines. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found there had been improvements in relation to medicines management and the provider was no longer in breach of regulation 12.

- Medicines were managed safely. People's records were accurate and regularly reviewed. Relatives and people we spoke with did not have any concerns around medicines and confirmed that people were receiving them.
- Staff followed national best practice guidance with regards to medicines management.
- Quality and assurance systems in place allowed the registered manager to effectively monitor medicines safely.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Safeguarding policies were in place which were accessible to staff, people and relatives.
- Staff were knowledgeable about what action they would take if abuse were suspected. One staff member told us, "If we need anything about safeguarding it's in the file and communication files... if I see something that I'm not happy with I give it to my senior and if they don't do anything I'd take it to my manager and if I'm still not happy I'd go through whistleblowing."

Assessing risk, safety monitoring and management

- Risks were clearly identified, assessed, mitigated and monitored. People had comprehensive risk assessments in place created between staff, people and their relatives. Care records showed risk assessments were regularly reviewed and included steps staff should follow to keep people safe.
- There were environment risk assessments in place to keep people, relatives, staff and visitors safe. The premises were safe and there was regular testing of equipment and utilities.
- People and relatives told us they felt the home was safe. A relative told us, "Definitely safe and well looked after and cared for."

Staffing and recruitment

- Staff were recruited safely, and appropriate checks were carried out to protect people from the employment of unsuitable staff.

- There were enough staff available to meet people's needs. Care was provided by a consistent staff team.
- People did tell us they sometimes had to wait for assistance but their needs were met. One person said, "I don't wait very long, but they have other things to do. There are staff there when I need something," another said, "I know if they don't come, they are obviously with someone, so it's a case of waiting until someone is free."

Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections. There were robust procedures on entry to the building to minimise the spread of infection. A visitation room was also in place with measures in place to encourage social distancing.
- We were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was accessing testing for people using the service and staff.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises. Additional cleaning had been implemented including areas of high contact being cleaned every 20 minutes.
- We were assured the provider was making sure infection outbreaks could be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- All accidents and incidents were reviewed to identify any trends and learning points.
- Lessons learned were shared with staff as part of their development.

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 requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Peoples outcomes had greatly improved after moving into the service. Relatives could see a positive change in people. A relative told us, "Since [person] has been in Rueben they have significantly improved. They are content and safe."
- There was a positive staff culture within the service and the registered manager worked with staff to drive forward improvement. One relative said, "It's very personal care and lovely to see. It's such a friendly place. The culture there, is incredibly positive. It must come from the top and the staff embrace it."
- The quality and assurance systems in place had been reviewed and embedded throughout the service and were used to continuously improve the service and quality of care provided to people.
- The registered manager was fully aware of their legal responsibilities and was open and transparent. They submitted notifications to us for significant events that had occurred at the service, for example accidents and incidents. Staff said the registered manager was approachable and supportive. One staff member said, "The manager has been very supportive over the years, she's very approachable."

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; Continuous learning and improving care

- The registered manager understood the duty of candour and had passed their learning to staff. Staff told us it was important to apologise when things had gone wrong but to also use incidents to learn, reflect and improve.
- Staff felt able to approach the registered manager when things went wrong. Staff said, "If there was an error I'd go straight to the manager, and then we would fill in an incident form and the manager would investigate from there."
- The registered manager was committed to continuously improving the service. Since the last inspection improvements to risk assessing and medications had been made.
- All members of the staff team were open and responsive to our inspection feedback.

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

- The service worked in partnership with health and social care professionals who were involved in people's care.
- People and their relatives had their views taken into account through care reviews. When there were

significant changes in a person's health the registered manager reviewed their plan of care with those important to them.

- People, relatives and staff were asked for their views of the service. Staff told us they were listened to by management and their ideas were used to improve the overall service.