

Country Court Care Homes Limited

Ruckland Court

Inspection report

1 Ruckland Court
Ruckland Avenue
Lincoln
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Date of inspection visit:
15 June 2021

Date of publication:
01 July 2021

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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

Ruckland Court is a care home providing accommodation and personal care for up to 50 older people who may live with dementia or other mental and physical health conditions. At the time of the inspection there were 44 people residing in the home.

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

People were cared for by staff who understood how to keep them safe and had been trained to do so. Risk assessments were in place and reviewed regularly and as people's needs changed. Measures were in place to mitigate identified risks.

There were enough staff employed to meet people's needs and wishes. Safe recruitment procedures were followed to ensure staff were suitable to work with people who lived at Ruckland Court.

People were supported appropriately with their medicines and good infection control practices were in place.

People spoke highly of the registered manager and staff team, commenting on their kind and supportive approach. Their views were sought, and they were involved in how the home was run.

A quality monitoring system was in place to ensure any shortfalls were identified and addressed in a timely way and the home continued to develop and improve people's 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 for this service was good (published 29 October 2018).

Why we inspected

The inspection was prompted in part due to concerns received about leadership within the home and people's safety. A decision was made for us to inspect and examine those risks. We found no evidence during this inspection that people were at risk of harm from these concerns.

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.

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 below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Ruckland Court

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 two inspectors.

Service and service type

Ruckland Court 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 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. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection

We spoke with six people who used the service about their experience of the care provided. We also observed the care and support people received as some people were not able to share their experiences with us. We spoke with six members of staff including the registered manager, a senior care worker, care workers, a housekeeper and a chef. We also spoke with the provider's area manager who provided direct support to the service.

We reviewed a range of records. This included five people's care records and multiple medication records. We looked at six staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including quality assurance audits were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. For example, we looked at training data and policies. We spoke with four relatives to gain their views about the services provided for their loved ones.

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 now 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 told us they felt safe living at Ruckland Court. One person said, "I'm safe here, it's lovely."
- Relatives felt their loved ones were well protected. One relative told us, "I feel quite content as I feel it's a safe and caring place for people."
- Staff knew what action to take to protect people from abuse and harm, including who to report their concerns to. They had received training about safeguarding procedures and information was available around the home to support this.
- The registered manager had worked with the local authority to promote people's safety.

Assessing risk, safety monitoring and management

- Risks to people's health, safety and welfare had been assessed, for example, in relation to needs such as mobility, dietary intake and skin care.
- Risk management plans were reviewed at least monthly and updated as people's needs changed. The registered manager was aware that some risk management plans, and review records required additional detail to fully reflect the support people received. They had plans in place to do this.
- Staff were knowledgeable about people's assessed needs and knew how to manage the associated risks. We observed staff supporting people, for example, with their mobility in line with risk management plans.
- A range of equipment was in place to help people and staff manage identified risks, such as special beds, sensor alarms and hoists. Some people, who were able to use them, had mobile call bells which meant they could summon assistance from wherever they were in the building.

Staffing and recruitment

- The provider had systems in place to ensure staff were suitable to work with people who lived at Ruckland Court. For example, we saw references from previous employers, identity checks and Disclosure and Barring Service checks. This check is made to ensure potential staff do not have any criminal convictions that may affect their suitability to work with vulnerable people.
- There were enough staff to keep people safe and meet their needs. A regularly reviewed dependency tool was used to calculate how many staff were needed according to the level of care people required. We saw no evidence of people waiting for their needs or wishes to be met.
- Staff had the skills and knowledge to meet people's needs. Staff told us and records showed they had received a range of training which was updated regularly.

Using medicines safely

- Medicines were administered by staff who were trained to do so. Protocols were in place for medicine which was administered 'as and when needed' (known as prn medicine) to ensure it was given

appropriately.

- Systems were in place to ensure medicines were ordered, received and stored safely. This included medicines which required special storage and recording systems (known as controlled medicines).
- People were supported to take their medicines in the way they preferred. We saw, for example, a care plan recorded that a person liked to take their medicines one at a time from their hand with a drink. We saw staff supported the person to do this.

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.

Learning lessons when things go wrong

- Processes were in place to monitor and analyse accident and incident reports so that appropriate follow up action could be taken to reduce the risk of the same things happening again.
- Lessons were learned when things went wrong. We saw an example of how improvements had been made to medicine records following an incident.
- Staff told us learning was shared with them by the management team through staff meetings and supervision sessions. The registered manager acknowledged the minutes of staff meeting could better reflect lessons learnt discussions.

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 now 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.

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

- People spoke highly of the registered manager and staff team. One person told us, "[Registered manager] is the best one we've had." Another person said, "[Deputy manager] is lovely; all the staff are so kind."
- People told us they were involved in making decisions about their care and how the home was run. We saw, for example, a comments book in the dining area where people could make comments about the meals they had. We also saw how kitchen staff spoke with people about their comments and accommodated individual preferences.
- Relatives spoke highly of the registered manager and staff team and their communication with them. One relative told us, "[Loved one] has been extremely happy the whole time. Staff are excellent, very good." Regarding admission to the home, another relative said, "Ruckland Court were tremendous; [administrator] was amazing, helpful and kind." They went on to describe the registered manager and deputy manager as, "Super kind and professional."
- Staff told us they enjoyed working in the home and had high regard for the registered manager. A staff member said, "[Registered manager] is brilliant; I trust her to deal with [concerns]." Another staff member told us about feeling supported and said the registered manager was, "A good manager; you can talk to her."
- The registered manager and staff demonstrated a commitment to providing personalised, high quality care for people who lived at Ruckland Court. We saw staff had developed positive relationships with people and their relatives and ensured they were treated with respect and dignity.

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

- Systems were in place to monitor the quality and effectiveness of the services provided for people. The registered manager conducted a daily walk around to ensure, for example, care was taking place in line with people's preferences and care plans.
- The registered manager carried out a programme of quality assurance audits which analysed topics such as skin care, diet and nutrition and care planning. A quality and risk indicator tool was also used to analyse any falls or pressure ulcer incidents.
- The area manager carried out regular audits to ensure any actions required had been taken and to ensure continuous development within the home. We saw, for example, how care documents were being transferred to an electronic format in order to improve access for people and staff.
- The registered manager was aware of their responsibilities to inform us of significant events which

occurred in the service and did so in a timely manner.

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 understood and complied with the duty of candour. The duty of candour requires providers to be open and honest with people when things go wrong with their care.
- A complaints policy was in place and relatives were aware of how to make a complaint if required.

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

- People with a range of abilities and equality characteristics were supported at Ruckland Court. They and those who were important in their lives were fully involved with their care and made significant decisions.
- Where people needed the support of others to make significant decisions, best interest procedures had been followed. People also had access to advocacy services, which are independent of the home and can ensure people's voices are heard.
- People, their relatives and staff were encouraged to contribute their views on an ongoing basis informally and through regular meetings and surveys.
- The registered manager and staff worked in partnership with health and social care professionals. We saw evidence of referrals being made to external agencies including doctors, dietitians and falls teams.