

Milecertain Limited

# Richmond Residential Home

## Inspection report

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## Ratings

Overall rating for this service

Good 

Is the service safe?

**Requires Improvement** 

Is the service well-led?

**Good** 

# Summary of findings

## Overall summary

### About the service

Richmond Residential Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. Richmond Residential Home is registered to provide accommodation for up to 20 people who require support due to mental health needs. At the time of our inspection, there were 17 people living in the home.

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

Improved systems had been implemented to monitor the quality and safety of the service. Regular internal and external checks were also completed to ensure the building and equipment remained safe. Although most risks to people had been assessed, not everyone had their risk from COVID-19 assessed. Staff had stopped monitoring people's temperature, in order to early identify possible COVID-19 symptoms, after people had been offered vaccinations. This was recommenced straight away in line with current government guidance. Staff supported people following accidents and incidents, but records were not always robustly completed, and it was not recorded if medical advice was sought. We made a recommendation about this in the main body of the report.

Staff were aware of the government guidance in relation to COVID-19 testing and told us they completed tests in line with this. However, records were not always robustly completed to reflect this. A new system was implemented before the end of the inspection to improve this. Staff had access to enough PPE and used this appropriately. An infection prevention and control (IPC) policy was in place and regular cleaning schedules to help prevent the spread of infection.

People told us they felt safe living at Richmond. They were supported by sufficient numbers of safely recruited staff, that were aware of safeguarding procedures and how to raise any concerns. Medicines were stored and managed safely, and people told us they received their medicines when they needed them.

The registered manager was aware of their responsibilities and had notified CQC of events providers are required to inform us about. They worked with other professionals to help maintain people's health and wellbeing and feedback regarding the care provided to people was positive.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was requires improvement (published 21 May 2019) and there were breaches of regulations identified. 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 undertook this focused inspection to check the provider 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. The inspection was in part prompted by a monitoring call completed with the registered manager, which suggested that significant improvements had been made.

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.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Richmond Residential Home on our website at [www.cqc.org.uk](http://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?

**Requires Improvement** ●

The service was not always 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.

# Richmond Residential 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.

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 team consisted of one inspector.

#### Service and service type

Richmond 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.

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 quality and safeguarding teams. 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 of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and one relative about their experience of the care provided. We spoke with four members of staff including the registered manager.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the running of the service were reviewed, including audits, staff training and health and safety checks.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at policies and procedures and other quality assurance records.



# 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 remained the same. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

### Assessing risk, safety monitoring and management

At the last inspection the provider was found to be in breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was because the environment and equipment within the home had not been safely maintained. At this inspection, we found that improvements had been made and the provider was no longer in breach of regulation.

- Improvements had been made and regular internal and external checks were now completed on the building and equipment to help maintain safety.
- Care files showed that some individual risk assessments had been completed and provided information on measures in place to reduce any identified risks. Although COVID-19 risk assessments were in place for people in specific circumstances, such as those people accessing the community, or people who chose not to take part in the regular testing regime, they were not in place for all people. The registered manager agreed to ensure risks regarding COVID-19 were assessed for all people. There has not been an outbreak of COVID-19 within the home.
- Staff had stopped monitoring people's temperature, in order to early identify possible COVID-19 symptoms, after people had been offered vaccinations. However, the government guidance has not changed and so the registered manager reintroduced these checks straight away.
- Personal emergency evacuation plans were in place to advise what support people would require in the event of an emergency.

### Learning lessons when things go wrong

- Accident audits were completed, however records showed that accidents and incidents were not always robustly recorded in line with the provider's procedures and so were not all included within the audits. The registered manager addressed this with staff and amended the procedures to ensure all accidents were fully recorded.
- Staff supported people following accidents to ensure they were safe, however it was not always clearly recorded if medical advice was sought appropriately.

We recommend the provider reviews and updates procedures to ensure accidents and incidents are robustly managed and recorded.

### Preventing and controlling infection

- Staff were aware of government guidance regarding COVID-19 testing and told us they completed tests in

line with this. However, records were not always fully completed, so we could not be sure that all staff completed testing as required. The registered manager created and implemented a new system before the end of the inspection, to ensure testing was completed and recorded.

- Steps had been taken to promote social distancing within the home, including the replacement of sofas with individual chairs. The home appeared clean and regular cleaning schedules were in place to help prevent the spread of infections.
- We were assured that safe admission and visiting procedures were in place. An infection prevention and control (IPC) policy was also in place and regular audits completed and shared with the local IPC team.
- Staff had access to good supplies of PPE, and we observed this being used appropriately. A relative told us, "The staff apply the rules. They wear masks and I have to take a test and wear a mask when I visit."

Systems and processes to safeguard people from the risk of abuse

- Staff had undertaken safeguarding training and were clear about their responsibilities in reporting and recording any concerns.
- Safeguarding and whistleblowing policies were also in place to guide them in their practice.
- People told us they felt safe at Richmond. Their comments included, "Yes I feel safe. I would tell one of the staff if I had any concerns" and "Of course I feel safe, I have no concerns." A relative agreed and told us, "Staff provide good support, they look after [relative's] interests."

Staffing and recruitment

- Records showed that staff were recruited safely to ensure they were suitable for the role.
- People told us there were enough staff available to meet people's needs. One person said, "There are enough staff, there is always someone there; they are very helpful." Staff agreed and told us, "There are enough staff, we cover each other so don't need to use agency. We work well together as a team."

Using medicines safely

- Systems in place helped to ensure medicines were managed safely. They were stored in a locked trolley and cupboards in the medication room and the temperature was monitored each day. Regular audits were completed, and stock balance checks made during the inspection were accurate.
- New systems had been introduced to help prevent errors or omissions in administration.
- Staff that administered medicines had completed training and had their competency assessed.
- People told us they were happy with how their medicines were managed. One person said, "I need my medicines three times a day and I always get them."



# 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.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

At the last inspection the provider was in breach of Regulation 18 of the Care Quality Commission (Registration) Regulations 2009, as they had not informed CQC of all reportable incidents. During this inspection we found that improvements had been made and the provider was no longer in breach of regulations.

- The registered manager had notified CQC of events and incidents providers are required to inform us about, although there had not been many notifiable incidents since the last inspection.
- There was a registered manager in post, and they were aware of their role and responsibilities.
- The ratings from the previous inspection were displayed within the home as required.
- A range of policies and procedures were in place to help support staff in their roles.

Continuous learning and improving care

At the last inspection the provider was found to be in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) 2014. During this inspection, we found that improvements had been made and the provider was no longer in breach or regulation.

- The systems in place to monitor the quality and safety of the service had been improved and enabled the registered manager to assess a range of areas to help maintain standards and make improvements when necessary.
- The provider is based at the service and is involved in the day to day running, which ensured they had oversight of the service.
- The registered manager took responsive action to issues raised during this inspection to make improvements and maintain safety.
- The registered manager and provider had worked hard to address the concerns raised at the last inspection.

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

- The culture of the service helped ensure good outcomes for people.

- People told us they were safe and happy living in Richmond and staff told us they enjoyed their jobs. Comments included, "We all love our jobs, we are like a big dysfunctional family, like The Walton's" and "You can raise suggestions with [registered manager] and she considers them. I have no concerns; I am happy in my job."
- People were supported to make their own choices and decisions, and these were respected.
- Measures had been taken during the COVID -19 pandemic to enable people to maintain contact with their relatives.

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

- Relatives were kept informed and made aware of any accidents or incidents involving their family member. A relative said, "I have no concerns. I communicate with [registered manager] and the staff and can raise any issues although I have not had any recently. When I have raised issues in the past they have been dealt with."
- Staff told us that they would always raise any concerns they had with the registered manager. Their comments included, "I have a good relationship with [registered manager] and go to her at any time" and "[Registered manager] is approachable and I can go to her anytime, she really does have an open door policy."

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

- Systems were in place to gather feedback regarding the service. People told us they could share their views and records showed resident meetings were held to seek people's feedback.
- The registered manager and other staff worked with health and social care professionals to help maintain people's health and wellbeing.
- Care files showed that referrals were made to relevant professionals for their specialist advice and support when required and their advice was incorporated into plans of care.