

Mr Peter Fenton Warwick

Riverside Rest Home

Inspection report

17 West Beach
Lytham St Annes
Lancashire
FY8 5QH

Tel: 01253737317

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service:

Riverside rest home is registered for 26 older people who may live with dementia. At the time of the inspection visit there were 23 people who lived at the home. The home is situated on Lytham sea front close to the town centre.

People's experience of using this service:

People who lived at Riverside and relatives we spoke with felt confident in the management team and how the service operated. They told us good staffing levels afforded people responsive and dignified support.

It was clear staff morale was good and everyone was committed to ensuring people received care and support based on their preferences and life choices.

People's care and support had been planned proactively and in partnership with them. They felt consulted and listened to about how their care would be delivered.

People who we could talk with who lived at Riverside consistently told us staff were polite, reliable, caring and respectful in their support for them. For example, one person said, "They know me well and treat me with respect. It is a great place."

People who lived at Riverside expressed positive views on how they were treated by staff.

The service continued to have good oversight of relevant procedures through monitoring and auditing to ensure people who lived at the home received medication safely.

Staff files we looked at evidenced the registered manager used the same safe recruitment procedures we found at our last inspection. Staff records showed personnel received training to enhance their skills. Staff we spoke with confirmed this.

Risk assessments had been developed to minimise the potential risk of harm to people during the delivery of their care. These had been kept under review and were relevant to the care provided.

Care plan information focused on a person-centred method of supporting people. Also, information contained what support was required and consent to care forms had been signed by people who lived at Riverside or their representative.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

Staff supported people with their meals sensitively and respected their privacy. Staff checked they had

enough to eat and comments were positive in relation to quality of meals and choices available to them.

There was a complaints procedure which was made available to people and their family when they commenced using the service. People we spoke with told us they were happy with the support they received. No complaints had been received by the service since the previous inspection.

The registered manager used a variety of methods to assess and monitor the quality of the service. These included satisfaction surveys to seek their views about the service provided. Recent surveys only produced positive comments about the home.

More information is in Detailed Findings below.

Rating at last inspection: Good (report published 02 December 2016).

Why we inspected: This was a planned inspection based on the rating at the last inspection. The service remained rated good overall.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme or if any issues or concerns are identified.

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 effective?

Good ●

The service was effective

Details are in our Effective findings below.

Is the service caring?

Good ●

The service was caring

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service was responsive

Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service was well-led

Details are in our Well-Led findings below.

Riverside Rest 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.'

Inspection team: Consisted of an adult social care inspector.

Service and service type: Riverside Rest 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, both of which we 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 comprehensive inspection visit took place on 05 February 2019 and was unannounced.

What we did: Before our inspection we completed our planning tool and reviewed the information we held on the service. This included notifications we had received from the provider about incidents that affect the health, safety and welfare of people supported by the service and previous inspection reports.

We also checked to see if any information concerning the care and welfare of people supported by the service had been received. We contacted the commissioning departments who used Riverside Rest Home. We also contacted other health and social care organisations such as Healthwatch Lancashire. Healthwatch Lancashire is an independent consumer champion for health and social care. This helped us to gain a balanced overview of what people experienced living at Riverside.

As part of the inspection we used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection visit we spoke with a range of people about Riverside. They included five people who lived at the home, the registered manager, two members of the management team and four care staff. We also spoke with one relative/friend and the cook.

We looked at records relating to the management of the service. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead Riverside in ongoing improvements. We also looked at staffing levels, recruitment procedures and the environment. We checked care records of two people who lived at the home and documents related to the safety of people who lived at Riverside.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People who lived at Riverside were protected from potential abuse and avoidable harm by staff that had regular safeguarding training and knew about the different types of abuse.
- The management team had effective safeguarding systems to support people. Staff we spoke with had a good understanding of what to do and who to report concerns to. This helped ensure people were protected from harm or abuse.
- People who lived at Riverside told us they felt safe in their care. One comment was, "Yes I feel perfectly safe. The staff make you feel that way."

Assessing risk, safety monitoring and management

- Staff spoken with understood where people required support to reduce the risk of avoidable harm. Care plans we looked at contained explanations of the control measures for staff to follow to keep people safe and reduce risk of accidents and incidents.
- There was a positive approach to risk taking to enable people to maintain their independence. For example, one person who lived at the home said, "I do like to get about myself. I know I am unsteady but the staff are great and help when needed."

Staffing and recruitment

- Staff continued to be recruited safely. All pre-employment checks had been carried out including Disclosure and Barring Service (DBS) checks from records we looked at.
- We looked at how the service was staffed and found appropriate arrangements were in place as at the previous inspection. People who lived at Riverside told us they felt enough staff were available to meet their needs. In addition, staff we spoke with were satisfied sufficient staff were on duty.

Using medicines safely

- There were suitable arrangements for ordering, receiving, storing and disposal of medicines, Storage temperatures were monitored to make sure that medicines would be safe and effective.
- Staff completed daily checks and the management team undertook regular audits. Any actions needed were identified and completed to improve medicines management at the service. For example, audits had identified recording of medication documents had not always been signed and this had now improved.
- We found people's medicines continued to be managed safely by the service. Medicines were managed in line with the National Institute for Health and Care Excellence (NICE) national guidance. This showed the registered manager had systems to protect people from unsafe storage and administration of medicines.

Preventing and controlling infection

- We walked around the building and found it was clean, tidy and maintained. We observed staff making appropriate use of personal protective equipment such as disposable gloves and aprons. This meant risks were reduced from potential infection when staff supported people with personal care and undertaking cleaning duties.

Learning lessons when things go wrong

- We looked at how accidents and incidents were managed by the service. There had been few accidents. However, where they occurred any accident or 'near miss' was reviewed to see if lessons could be learnt and to reduce the risk of similar incidents.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

People's outcomes were consistently good and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Staff applied learning effectively in line with best practice. This led to a good care home for people who lived at Riverside and a good quality of life. People who lived at the home we spoke with confirmed this.
- Care records were regularly reviewed and updated when changes occurred. This meant people's support was up to date to ensure they received the right care and support that was required.
- People were assessed before they moved into Riverside to check their needs were understood and could be met. One person who lived at the home told us they were consulted about the care and support they would receive when moving into the home.

Staff support: induction, training, skills and experience

- We spoke with staff and found they had experience and were competent, knowledgeable and skilled in working with vulnerable people. All staff we spoke with told us training was provided and updated in different formats. One said, "Great training always available to update your skills."
- We found the registered manager had a wide-ranging training programme to enhance and develop staff knowledge to ensure they had skills to support people.

Supporting people to eat and drink enough to maintain a balanced diet

- People who lived at the home told us they were provided with healthy and quality meals and snacks. One person said, "We have a good cook and lots of choice."
- Kitchen staff were aware of any specific dietary requirements. For example, if people needed their food to be blended to minimise the risk of choking.
- Care plans included information about people's dietary needs and their likes and dislikes. This included any information about specific aids people needed to support them to eat and drink independently.
- If people were at risk of declining health due to poor food and drink intake staff monitored what they consumed and had a plan to support the person.

Staff working with other agencies to provide consistent, effective, timely care

- Staff continued to work with other healthcare services to maintain their continuity of care. This included GPs, specialist hospital and community services and social workers. Staff had recorded the outcome of visits or appointments and noted required actions to manage the person's ongoing support.

Adapting service, design, decoration to meet people's needs

- The building provided people with choices about where they spent their time.
- Access to the building was suitable for people with reduced mobility and wheelchairs. A passenger lift was

available if people needed it to access the upper floors.

Supporting people to live healthier lives, access healthcare services and support

- People were encouraged to stay healthy by promoting healthier lifestyles. Staff supported people to continue to mobilise independently to ensure they had choices and made their own decisions within a risk framework.
- The management team engaged with other organisations to help provide consistent care.

Ensuring consent to care and treatment in line with law and guidance

- People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The registered manager knew the process to safeguard people who did not have capacity. Records we reviewed included an assessment of capacity and best interest decisions. Throughout our inspection, we observed people were supported to make their day-to-day decisions.
- Decisions taken on behalf of people who were unable to make decisions for themselves were done in line with the best interest process. Where possible friends and relatives who knew the person well were involved in the process. The management team recorded when people had power of attorney arrangements in place.
- People were asked for their consent before any care was delivered. People who were able to had signed their care plans to indicate they were in agreement with their planned delivery of care.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

People were supported and treated with dignity and respect and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- Staff were kind, caring and patient with people and this was observed throughout the inspection visit. In addition, people told us how well they were treated. Relatives wrote positively in surveys returned to the registered manager. For example, one relative wrote, 'I cannot speak highly enough of the staff.'
- Care records reflected important information in relation to each person's dignity and privacy. It was clear care records and the attitude of staff was to ensure support given to people who lived at Riverside was personalised and respected. One person who lived at the home said, "They know me well and treat me with respect. It is a great place."

Supporting people to express their views and be involved in making decisions about their care

- Some people who lived at the home required aids to help them communicate effectively. For example, hearing aids or spectacles. This was recognised by the staff team and supported. Care plans recorded if people needed spectacles or hearing aids. Regular appointments were carried out at opticians for example.
- There was information available about access to advocacy services should people require their guidance and support. The registered manager had information available for people. This ensured their interests would be represented

Respecting and promoting people's privacy, dignity and independence

- The registered manager and staff supported people to maintain their lawful rights as set out in the Human Rights Act 1998. For example, they assisted those who lived at Riverside to retain their 'Freedom of thought, conscience and religion', Article 9 of the act. They achieved this through recording each person's spiritual needs and helping them to access relevant services.
- People's privacy was respected. For example, when staff supported people with personal care in their rooms, they ensured doors were shut to make sure they were not disturbed.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Care records we looked for people who lived at the home were detailed. They demonstrated a person-centred approach to plan and support people to meet their needs. For example, care records contained physical, mental health, social and personal care needs. They also contained each person's history and preferences so that staff had information that would support them to provide quality care.
- People's rooms were personalised for example, decorated and furnished to meet their personal tastes and preferences.
- Staff told us they were encouraged to spend time socialising with people and were encouraged to sit and talk with them. Staff responded by telling us this was what the management team wanted them to do. Staff organised a range of activities and regular outside entertainers to come into the home. One person who lived at the home confirmed this and said, "We have a good singer who comes in regularly."

Improving care quality in response to complaints or concerns

- People who lived at Riverside told us they would be confident to speak to the registered manager or staff if they were not happy or had issues. One person said, "They are approachable and I would speak out if there was anything that needed to be brought to their attention." No complaints had been received since the previous inspection.

End of life care and support

- When people were receiving end of life treatment specific care plans were developed. This was to ensure people were made comfortable and received the right care and attention.
- Evidence by speaking with staff confirmed to us they had been trained in end of life care and a training programme we looked at identified this. This demonstrated the registered manager understood the importance of providing end of life support and how this should be delivered. At the time of our inspection visit, none of those who lived at Riverside were on end of life care.

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

The service was consistently managed and well led. Leaders and the culture they created and promoted high-quality, person centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The registered manager and management team were able to speak with us about the care of individuals living at Riverside. They demonstrated a good understanding and awareness of people's needs, likes and choices.
- Comments we received about the management of Riverside were positive about the organisation and the way the home operated. For instance, one staff member said, "We are a family run home and that is why we have confidence in them to run a quality home for people."

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

- The service had clear lines of responsibility and accountability. The registered manager, management team and staff were experienced, knowledgeable and familiar with the needs of people they supported.
- Evidence demonstrated the registered manager had quality assurance processes that were effective and improved the service as intended. For example, processes involved checks being carried out such as meetings and informal discussions with staff and relatives. This helped to ensure the service continued to improve.
- The registered manager had notified CQC of any incidents in line with the regulations. Ratings from the previous inspection were displayed in the hallway of the home.

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

- People and their relatives were asked for their views of the service generally through questionnaires/surveys and informal meetings. Results from recent surveys were positive and included comments such as, 'All good the team at Riverside really care.'
- Staff and people who lived at the home told us they had informal meetings daily with the management team. They enjoyed discussions about the home and what could be done to improve things.

Continuous learning and improving care

- The registered manager completed a range of quality audits to ensure they provided an efficient service and constantly monitored Riverside. This demonstrated improvements could be made to continue the home to develop and provide a good service for people who lived there.

Working in partnership with others

- The registered manager at Riverside worked in partnership with other organisations to make sure they followed current practice, providing a quality service and the people in their care were safe. For example, local social services and healthcare professionals. A recent report from the local commissioning department reported on how well the service operated.