

Miss Rebecca Clair Walsh

Rigewood House

Inspection report

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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

Rigewood House is a care home in Chesterfield. They are registered to provide accommodation and personal care to up to 21 people. At the time of the inspection there were 20 people living there. People's bedrooms are over two floors, there is a choice of communal living areas and an outside garden area.

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

People, relatives and staff all told us the home was consistently well-led. The registered manager led by example and ensured everyone had a say in the running of the home. Governance systems were in place but were not always documented.

We recommended the registered manager review the governance systems to ensure they demonstrate the constant work undertaken to maintain the safe care at Rigewood House.

People were safe and protected from harm. People received their medicines as prescribed. There were enough staff on duty to meet people's needs and preferences in a timely manner. Staff were safely recruited. There was a culture of learning and continuous improvement.

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.

Staff were supported to undergo training to know how to meet people's needs. People had choice over their food and drink and told us they enjoyed what they ate and drank. The home was decorated to meet people's needs and preferences. People were supported to access support from healthcare professionals in a safe and effective way.

Staff were kind and caring. People and their relatives consistently praised the staff and told us the home was like one big family. People were supported to be as independent as possible and their individual characteristics were respected and promoted.

People maintained relationships with the friends and relatives that were important to them. The registered manager had used innovative ways to ensure regular meaningful visits still happened during the pandemic. There was a variety of activities available for people and people told us they enjoyed these.

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

Rating at last inspection

This service was registered with us on 10 October 2020 and this is the first inspection under this provider. The last rating for the service under the previous provider was good, published on 29 July 2016.

Why we inspected

We inspected this service because they had not previously been inspected under this provider.

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. This included checking the provider was meeting COVID-19 vaccination requirements.

Recommendations

We recommend the provider and registered manager review some processes to ensure legislation and best practice guidelines are always followed.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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? The service was effective. Details are in our effective findings below.	Good
Is the service caring? The service was caring. Details are in our caring findings below.	Good •
Is the service responsive? The service was responsive. Details are in our responsive findings below.	Good •
Is the service well-led? The service was well-led. Details are in our well-Led findings below.	Good •



Rigewood House

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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This included checking the provider was meeting COVID-19 vaccination requirements. 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 one inspector.

Service and service type

Rigewood House 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 (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

We used all this information to plan our inspection.

During the inspection

We spoke with five people who use the service, six of their relatives and eight staff including the registered manager, deputy manager and care staff. 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 reviewed six people's care records, three staff recruitment files, staff training records, multiple medicine records and other documents related to the running of the home.

After the inspection

We continued to speak with the registered manager and deputy manager to obtain information about the running of the home.



Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- There were systems and processes in place to protect people from the risk of abuse. There was a safeguarding policy and staff completed training in safeguarding which included local procedures for reporting concerns of abuse.
- People told us they felt protected from the risk of abuse. Staff told us they felt confident they could recognise signs of abuse and would feel confident raising these with the registered manager, deputy manager or local safeguarding professionals.

Assessing risk, safety monitoring and management

- People were protected from the risk of avoidable harm.
- People told us they felt safe. One person said, "This is the safest place on Earth, I am as safe as houses." All relatives told us they felt their relations were safe. One relative said, "[Name] is incredibly safe here, the staff do everything possible and the manager runs a very tight ship, very safe indeed."
- Risks to people's safety were assessed and reviewed regularly. Staff knew people well and understood how to keep people safe.

Staffing and recruitment

- There were enough staff on duty to keep people safe and meet their needs in a timely manner.
- People told us staff came quickly when they asked for support. One person said, "There's always the [staff] here to help me, I never need to wait here." Relatives told us they felt there were enough staff. One relative said, "I have never known anyone wait for care at Rigewood House, the staff are always available as soon as [Name] needs them."
- Staff were safely recruited. The registered manager ensured pre-employment checks such as criminal records checks and references from previous employers were reviewed.

Using medicines safely

- People received their medicines safely.
- The provider had a system for recording all medicines that were received, administered and disposed of. Although the system was not in line with current best practice guidelines there were no errors or gaps in the records we reviewed.
- The registered manager sought advice from a pharmacist immediately after the inspection with a view to updating their system to work within current best practice guidelines.

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.
- The provider was facilitating visiting for people who lived at the service and people were happy with the arrangements in place.

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19 unless they have an exemption or there is an emergency. We checked to make sure the service was meeting this requirement. We found the service had effective measures in place to make sure this requirement was being met.

Learning lessons when things go wrong

- There was a culture of learning and implementing improvements if things had gone wrong.
- The registered manager instilled a culture of openness and learning throughout the home. Where people may have had accidents there was an investigation to ensure the same thing didn't happen again. Any risks to people's safety were always reviewed.



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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant 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

- People's needs and choices were assessed, and staff knew people well including how they chose to be supported.
- The registered manager carried out holistic assessments to ensure they could meet people's needs and preferences. People's care plans included detailed information about how people preferred to be supported.
- Relatives told us the registered manager and staff took time to get to know people and by doing this they always ensured they cared for people in the safest and most effective way. One relative said, "I couldn't be happier with [Name's] care, before [Name] moved in the manager spent time getting to know us as a family unit and then made sure that same family level of care carried on."

Staff support: induction, training, skills and experience

- Staff received training that supported them to carry out their role effectively.
- The training staff received was in line with the care certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- New staff completed an induction and their competency was assessed before they worked independently.

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

- People had genuine choice over their food and drinks. People had access to the food and drink throughout the day and night. People chose where in the home they preferred to have their meals.
- People ate and drank things they liked. Three people told us the food was, "exceptional". One person said, "I very much enjoy the food, I choose what I want and if I don't want something [staff] make me something else."
- There was a choice of different foods and drinks available that catered to people's preferences and dietary requirements.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked collaboratively across services to share information where required and ensured people had access to the relevant professional support.
- There was a close working relationship with external professionals and health care professionals who

regularly visited people in the home.

• People were supported and encouraged to live healthier lives. For example, one person had previously been at risk of harm due to self-neglect. Since moving into Rigewood House they had become more motivated to self-care and their level of independence had significantly increased.

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

- People chose how their bedrooms were decorated and what furniture they preferred. People's bedrooms were all different and each catered to people's individual needs and preferences.
- There was a selection of different communal areas. People told us they liked having the choice of where to spend their time. One person said, "I like it in this bit of the lounge because it's busy and chatty, sometimes I go outside for fresh air or to the quiet lounge for some peace and quiet."

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

- People's ability to make decisions was assessed and their legal and human rights were upheld.
- Staff understood what decisions people could make and what decisions they needed to make for people in their best interest. Where people lacked capacity to make some decisions, people's relatives and/ or professional representatives were always involved in reaching best interest decisions.
- There were no people living there subject to a DoLS authorisation. The registered manager ensured this issue was considered and if anyone did require a DoLS application they would submit this appropriately.



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.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported, respecting equality and diversity

- The registered manager made sure staff had the time and guidance needed to support people in a compassionate and person-centred way.
- People told us they were always supported by staff who were kind and caring. One person said, "The staff that work here are more than staff, they know me inside out, they are like my family really, they do look after me." A different person said, "They [Staff] are just simply wonderful towards me, always nice, always help me, I couldn't ask for anything more."
- Relatives gave consistently positive feedback about the kind and caring way staff supported people. One relative said of the staff, "Absolutely top notch, couldn't be better, I have nothing but praise for them." A different relative said, "This home is so wonderful because of the manager and the staff, they are the best around."
- People's individual needs and preferences were known, respected and promoted. Staff knew people's religious and cultural beliefs and how to ensure these were always prioritised.

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

- People and relatives were consulted and involved in care planning, delivery and all other aspects in the running of the home.
- One person said, "Yes I know everything that happens here, my [Relation] and I always choose what's going on with me." One relative said, "I absolutely am fully involved and feel in control of [Relation's] care, nothing ever happens without me knowing. I feel incredibly lucky to have found Rigewood and couldn't be happier with every single thing that happens."

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect. Staff had time to form close and trusted relationships with people and their relatives.
- People were supported and encouraged to be as independent as possible. One relative said, "[Staff] always encourage [Name] to do as much as possible for themselves, it would be easier and quicker for the staff to do it for them but the staff really do take the extra time. This has meant [Name] has become more able and more confident, it's an absolute joy for me to know this."
- Staff told us they enjoyed people's company and were happy at work. One staff member said, "The best thing about being here is how much time we have to spend with people, we have lovely long chats and it's just like a big family." A different staff member said, "I really enjoy coming to work, not many people can say that. It's a pleasure to be in people's company all day, this is a happy home in every way."



Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People's needs and life choices were assessed and reviewed. People, their relatives and/or representatives were involved in all assessments and reviews.
- Staff knew people well and understood how to support them in the best way to ensure they achieved the best possible outcomes from their care.
- People were valued as individuals and supported to express themselves in whichever way made them most comfortable. For example, one person was known to enjoy conversations with staff but at times needed gentle support to feel confident to join in. We saw staff offer this gentle reassurance and encouragement many times throughout the inspection.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The AIS tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The service was meeting the AIS. Staff communicated with people in a way they understood. Information was provided in a variety of formats that met people's individual communication needs.
- Signs and notices around the home were presented in both written and pictorial format so people with sensory loss or living with dementia were able to understand these.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People maintained relationships with friends and relatives both inside and outside the home. People told us they had formed close bonds with both the staff and the other people living there. One person said, "I've made lots of friends here, we play dominoes, we do knitting, we do sing songs, we've done baking, never a dull moment."
- People were supported to take part in activities that promoted their well-being. One relative said, "[Name] helps to fold the laundry, this is a meaningful activity that helps them."
- The registered manager ensured people always spent time with relatives, even during the pandemic. They had set up a Bluetooth speaker in the dining room, so people were able to have clear easy to hear conversations during window visits when it wasn't possible to have visits inside.
- There was a system for booking indoor visits with people. These were done in an area where people could

enjoy private conversations with their visitors.

Improving care quality in response to complaints or concerns

- There was a complaints policy in place. Staff and relatives told us they wouldn't hesitate to raise complaints with the registered manager if they felt it necessary.
- Relatives told us they had never felt a need to complain but if they did they felt assured the registered manager would listen to them.

End of life care and support

- People were supported to consider and express any preferences they had for their care at the end of their lives. Staff completed training in how to support people if they were to approach the end of their lives.
- One relative said, "The communication we received when [Name] was thought to be approaching the end of their life was exemplary."



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.

This is the first inspection for this newly registered service. This key question has been rated 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; Continuous learning and improving care

- The registered manager had a system to identify themes and trends of incidents and where improvements may be required in the home. However, these were not always documented. Therefore, it was not always possible to evidence how much work and thought had gone into making sure people were as safe and happy as possible.
- The registered manager had not recognised that some systems within the home were not meeting current best practice guidelines. However, there was no impact to the safety and effectiveness of the care people received.

We recommend the registered manager ensure governance and audits records are updated to demonstrate the continuous assessment, monitoring and improvements in the home.

After the inspection the registered manager contacted us and showed us they had taken our feedback on board and had implemented some new processes that met current best practice guidelines.

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

- People, relatives and staff said the service was consistently well led. The registered manager shaped the culture of the home by demonstrating their own values of compassion, dignity, integrity and honesty.
- People who lived at Rigewood House achieved good outcomes. One person said, "I have so much fun, I wouldn't be anywhere else on Earth. This is a very happy place."
- Relatives spoke highly of the registered manager and their person-centred approach to care. One relative said, "The manager runs a tight ship here, everyone knows what they should do, and they do it very, very well. I am and always will be grateful to her." A different relative said, "Simply wonderful care, the manager leads by example and staff follow her lead."

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 ensured the duty of candour was met. They were open and honest and informed people, relatives and all external professionals of incidents where necessary.
- The registered manager understood when incidents needed to be reported to CQC which is a legal

requirement of registration.

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

- The registered manager ensured people, relatives and staff were involved in the running of the home in meaningful ways.
- One relative said, "I have always felt included and involved, I have made suggestions and offered to help, and this has always been welcomed. Before the pandemic I used to run activities in the home, I know [Staff] have carried these activities on for people."
- Staff told us the registered manager was approachable and always available to listen to any questions or suggestions. One staff member said, "It's the best place I've ever worked, everyone works together, and everyone just wants the best for the residents."
- Before inspections we seek feedback from commissioning teams and professionals who work with the service. The feedback we received was that the registered manager is open and honest and seeks support from professionals if necessary to ensure people receive the support appropriate for them.