

Mrs Gillian Conroy and Mr John Conroy

Riccall House Care Home

Inspection report

78 Main Street
Riccall
York
North Yorkshire
YO19 6QD

Tel: 01757248586

Website: www.riccallhouse.co.uk

Date of inspection visit:

04 October 2022

07 October 2022

Date of publication:

03 November 2022

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

Riccall House Care Home is a residential care home providing personal and nursing care to up to 18 people. The service provides support to older adults, some of who may be living with dementia. At the time of our inspection there were 16 people using the service.

Riccall House Care Home is a detached property that has been adapted. Bedrooms are across two floors with a stair lift serving one part of the first floor.

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

People's environment was homely, clean and safe because systems were in place to monitor and manage all aspects of health and safety.

People and their relatives told us they were happy with the care they received. They were confident in the registered manager and staff's abilities to provide a safe and caring environment with engaging and enjoyable activities.

People received their medicines as prescribed in line with their preferences by trained and competent staff.

People were safe from the risk of abuse and neglect because staff were trained and confident to speak up. Staff were safely recruited and had the relevant training for their roles.

Managers in the service led by example and created a positive and open atmosphere where everybody was confident to provide feedback to improve the service. The registered manager was quick to act on feedback to improve the experience of care for people living at the service.

One relative told us, "There seems to be an ethos of real care shown for the residents from all the staff and the registered manager and they have a knack of making them feel special." Another relative told us, "The residents and family meetings that the registered manager has introduced are very positive and constructive and have led to some enjoyable shared experiences, suggested by family and residents. They encourage and welcome suggestions, for example having a banjo player visit the home for my relative's birthday celebration, when everyone in the home enthusiastically joined in. For me, the meetings have also been a good opportunity to meet some of the relatives of other residents."

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 27 February 2021) and there were breaches of 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 focused inspection of this service on 25 November 2020. Breaches of legal requirements were 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, staffing and governance.

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.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. 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 Riccall House Care Home on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Riccall House Care 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 Health and Social Care Act 2008.

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 one inspector over two days.

Service and service type

Riccall House is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Riccall House is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced on the first day and announced on the second day.

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 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 2 people who used the service and 5 relatives about their experience of the care provided. 6 relatives provided feedback using our website. We spoke with 11 members of staff including the registered manager, care supervisor, senior carers, care assistants, domestic staff and a cook.

We reviewed a range of records. This included 2 people's care records in detail and 5 in less detail. We reviewed 2 people's medication records. We looked at 2 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including audits, policies and procedures were reviewed. We also reviewed training records, meeting minutes and other documents remotely.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management;

At the last inspection systems were either not in place or robust enough to demonstrate safety was effectively managed. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made that the service was no longer in breach of regulation 17.

- Systems were in place which allowed the registered manager and provider to have good oversight of the service and manage known and potential risks.
- Staff took responsibility for monitoring, recording and reporting risks appropriately. Action was taken promptly to address concerns identified by staff and by external professionals.
- The registered manager had introduced a range of audits and checks to ensure the service was providing safe, quality care to people.

Using medicines safely

At the last inspection the provider had failed to ensure the proper and safe management of medication. 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 enough improvement had been made and the provider was no longer in breach of regulation 12.

- Medicines were received, stored and administered safely by staff who were trained and competent.
- Staff had a good understanding of people's preferences around how they liked to take their medicines, and this was outlined in supporting documentation.
- Protocols were in place for "as and when required" medicines, so staff knew when people might need these and how to administer them.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

At the last inspection the provider had failed to ensure systems or processes were established and operating effectively, this is a breach of regulation of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection enough improvement had been made and the provider was no longer in breach of regulation 17.

- Systems and processes were in place to ensure people were safe from abuse and the risk of harm.
- Staff received safeguarding training and were confident in how they would address any concerns. Up to date policies and procedures were in place and the registered manager supported staff's understanding of these as part of the staff meetings.
- Accidents and incidents were reviewed regularly by the registered manager. Any patterns or trends were identified, and action was taken to mitigate risk.
- People and their relatives told us they felt safe. One relative told us, "I have nothing but praise for all the staff and management of the home, they know [relative] well and know all their likes and dislikes and eccentricities, and look after them in a very caring way in a safe environment. We could not wish for anything better than the excellent care and consideration they are given at Riccall House".
- Lessons learnt were shared with all staff and staff were encouraged to raise any ideas about where improvements could be made.

Staffing and recruitment

At the last inspection the provider failed to ensure there were suitably qualified, competent and skilled staff deployed this is a breach of regulation 18 (staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection enough improvement had been made that the provider was no longer in breach of regulation 18.

- Safe recruitment processes were in place and staff received a robust induction and regular training.
- A dependency tool was in place which ensured there were enough suitably qualified staff to meet the needs of people.
- Staff told us how they were supported and encourage to develop their skills and knowledge and gain extra qualifications. They had the opportunity to put their learning into practice to drive improvements in the service. One staff member told us, ""I've learnt loads since being here, the registered manager is really good at involving me and developing me, will always involve me and support my training needs. Whole team have worked their socks off, all the staff are very passionate."

Preventing and controlling infection

At the last inspection the provider failed to provide up to date guidance around preventing, detecting and controlling the spread of infections, this is a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection enough improvement had been made and the provider was no longer in breach of regulation 12.

- The provider had worked closely with external professionals to improve standards across the home, implement best practice and keep people safe from risks related to infectious outbreaks.
- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was supporting people living at the service to minimise the spread of infection.

- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was responding effectively to risks and signs of infection.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

Visiting in care homes

The service was supporting visits in and out of the care home in line with government guidance. When visiting was restricted families told us they were supported to maintain contact with their loved ones and were kept informed and up to date with how their family member was.

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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed 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; Continuous learning and improving care

At the last inspection the provider failed to ensure systems and processes were in place to assess, monitor and improve the service. This was a breach of regulation 17 (Good Governance) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection enough improvement had been made and the provider was no longer in breach of regulation 17.

- The registered manager had implemented new systems to audit the quality and safety of the service. These were effective in identifying improvements and action was taken to address the findings.
- Accidents and incidents were recorded and reviewed for any trends or patterns.
- The staff team worked with the registered manager to help improve the quality of the service and improve the experience for people living at the service.
- The provider and registered manager were working together to make further improvements to the environment of the service as they identified the current limitations they faced.

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

- The culture of the service was positive, open and person-centred.
- All staff we spoke to told us they felt support and listened to by the registered manager and provider. One staff member told us, "I have seen a difference since the registered manager has taken over, with the atmosphere, the structure and routines. Staff are more relaxed; they are an open and honest manager and so staff are willing to talk to them."
- One relative told us, "Feedback to and from the management is always welcomed and any action required dealt with promptly. I can't praise Riccall House enough."

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

- Feedback was sought from people, relatives and staff to improve the service. The provider used written feedback and face to face meetings to ensure feedback was meaningful for individuals.
- We saw how people's feedback had been sought, listened to and actioned. For example, people said they

wanted to be more adventurous with food, the cook then worked with people to develop a new menu. Staff then supported people to give further feedback and when people were unable to provide feedback, staff used observations at mealtime to gauge people's enjoyment.

- One relative told us, "Staff are amazing, they are outstanding in terms of the time and attention they give to [relative] it's 10 out of 10. They make sure they're engaged at all times; we are kept well up to date with care and have no concerns about safety. The registered manager is great and consults us on anything we need to know, even small things, making sure we're informed of everything, we have regular meetings that they invite family to attend."
- The home was involved in the local community and attended events in the village including fundraising and social events. For example, the home had recently taken part in an Olympics themed event with other services across North Yorkshire competing in sporting events.

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 provider and registered manager understood their legal responsibilities around duty of candour. If something went wrong, they understood when they needed to investigate, report and apologise to the relevant person.