

# Amicura Limited

# The Rivers

## Inspection report

The Croft  
Knottingley  
West Yorkshire  
WF11 9BL

Tel: 02084227365

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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

The Rivers is a residential care home providing personal care for up to 29 people. The service provides support to people living with dementia. The Rivers has 2 floors and each floor has 2 units. Only the 2 units on the ground floor are currently occupied. The service has plans to open the upstairs units in the future. At the time of our inspection there were 28 people using the service.

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

People were supported safely by staff who had received appropriate training. Staff had been recruited through a robust process and there were enough staff on duty to meet people's needs. Risks were assessed and reviewed regularly and accidents and incidents were reviewed to identify learning. People received their medicines safely and the home was clean and free from clutter. There were no restrictions on people receiving visits from family and friends.

Staff received training which enabled them to provide effective care and support to people. People were supported to maintain a healthy and balanced diet and they were encouraged to make choices about food they ate. Care and support was person-centred and people's bedrooms were personalised to their tastes. There was a homely atmosphere at The Rivers. 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.

People were happy with the care they received. Staff were kind and compassionate and supported people to maintain their dignity and independence. We observed lovely interactions between staff and people and they told us they liked living at The Rivers.

People's needs were assessed and they were involved in reviewing and updating their care plans. Support for people with communication needs was provided. People were engaged in a range of different activities and they were encouraged to make choices about what activities they wanted to do. There was a complaints policy and process in place. The service had focussed on conversations with people and their families about life stories and making plans to meet people's wishes at the end of life.

The registered manager had a clear vision for the service and they were supported by a management team who were focussed on providing good quality care and support for people. Regular checks of the service were carried out and monthly performance reports were prepared and shared with the regional manager. The service had a good relationship with the local GP practice and worked in partnership with professionals from health and social care organisations. People and their families were involved in meetings to receive updates and to share ideas and suggestions to enhance the care environment.

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

This service was registered with us on 5 April 2022 and this is the first inspection.

#### Why we inspected

This was a planned inspection to check whether the provider was meeting the legal requirements and regulations and to provide a rating for the service.

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, 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?

The service was safe.

Details are in our safe findings below.

Good ●

### 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 ●

# The Rivers

## 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

This inspection was carried out by 2 inspectors and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

The Rivers 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. The Rivers 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.

Inspection activity started on 12 July 2023 and ended on 20 July 2023. We visited the service on 12 July 2023.

#### What we did before the inspection

We reviewed information we had received about the service since it had been registered with us. 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 6 people who used the service and 4 relatives. We also spoke with the registered manager, the area manager and 6 members of staff including a unit leader, a senior carer, domestic staff, an activities co-ordinator and carers. We observed people at mealtimes and when they were engaged in activities. We reviewed a range of records which included 4 people's care records and various medication records. We looked at 4 staff files in relation to recruitment and staff supervision. A range of records relating to the management of the service including audits, analyses of data and policies and procedures were reviewed.

# 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

- People told us they felt safe at The Rivers. One person said, "I am safe because I am with a lot of people. I used to sit at home on my own. Now I have lots of people around me. I like it and want to stay." A family member told us, "Yes, I feel [relative] is safe. If anything goes wrong, I know there are people here and they look after [relative]."
- Staff had received appropriate training to safeguard people from the risk of abuse and staff confirmed they understood the process for alerting people if they had safeguarding concerns.
- Safeguarding incidents and concerns were recorded and analysed by the registered manager and reported to the area manager in regular monthly reports.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Care plans were detailed and people's risk assessments were reviewed regularly.
- A comprehensive system of environmental risk assessments and checks were carried out by the service. These included testing for legionella, fire safety checks and equipment testing in line with legal requirements.
- Accidents and incidents were recorded and reviewed by the management team to identify any learning which would help to prevent a reoccurrence.
- The registered manager had weekly risk meetings with the deputy manager, unit managers, senior carers and the cook to share key updates and support the cascade of information to staff teams.

Staffing and recruitment

- Staff were recruited safely. A range of checks including references and disclosure and barring checks (DBS) had been requested and obtained prior to new staff starting work in the service. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were sufficient staff on duty to meet people's care and support needs. One person was assessed as requiring their own staff member to provide individual support 24 hours a day. This support was provided consistently.
- New staff shadowed and observed experienced staff. We observed a new unit manager shadowing a senior carer so they could understand their role and provide leadership and support in the future.

Using medicines safely

- The administration of medications was managed safely and people received their medicines as prescribed.

- Medicine administration records (MAR) were completed appropriately and regularly audited.
- Medicines, including controlled drugs, were stored securely and processes were in place for the timely ordering, recording and disposal of medicines.
- People told us they received their medicines on time. One person said, "I have tablets in the morning, at dinner time and at night. I get them on time, it's fine."

#### 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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.

#### Visiting in care homes

- People were supported to receive visitors in line with current government guidance and we saw people's relatives visiting on the day of inspection.



# 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 care plans were person-centred and contained assessments of people's needs, risks, likes and dislikes.
- Care plans were reviewed regularly to make sure information about how best to support people was updated as needs changed.
- People were involved in developing and updating their care plans. A member of staff told us, "We speak with residents and build care plans with them, so we get information about them, from them."

Staff support: induction, training, skills and experience

- People received support from trained staff. Staff were provided with training which enabled them to support people effectively.
- Induction training was provided for new staff and they received ongoing support and supervision from their manager.
- The work of staff was spot-checked and feedback given about quality. One member of staff told us, "I get great feedback for my work from both management and colleagues."

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

- People were encouraged and supported to eat and drink a variety of different foods. People were given choices at mealtimes and supported to eat independently. A family member told us, "The meals are quite substantial and they have 'in betweens' like cakes and drinks. Juice is always out in jugs. It's poured for [relative] and they are encouraged to drink."
- People's weights were monitored regularly and reviewed by the registered manager. A family member told us, "They are doing a fantastic job. [Relative] is putting weight on. They weigh [relative] every week."
- Monthly audits of food planning, preparation and the dining room experience were carried out. Actions for improvement were identified and implemented.
- People were complimentary about the food at The Rivers. One person said, "The food is good, I get 2 choices in the morning, dinner time and at night-time. They come around at other times with tea and biscuits. They have been at night-time and I asked for a Horlicks. [Member of staff] brought it for me. If you ask, they will bring it for you." Another person told us, "It's nice enough and they give me second helpings of yoghurt."

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

- The management team completed a daily report about the health of people who lived at The Rivers. This

report was shared with the local GP practice which enabled them to allocate a clinician to attend the home and provide support and advice as required.

- Community nurses supported people with dressings and clinical care.
- The service had good relationships with a range of health and social care agencies so people received effective and timely clinical care and support.
- Family members confirmed that people accessed healthcare professionals to support their care, their comments included, "[Relative] has physio treatment to try and get them out of bed. They are getting squishy balls for their hands to try and make them less stiff."

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

- The home had been designed and built to meet people's needs. Toilets and bathrooms were adapted for people to use.
- People had personalised their bedrooms and decorated them with pictures of family members. A family member told us, "[Relative's] room is personalised to how they wanted it."
- Following a discussion at a resident's meeting, the home was in the process of setting up a bar area so people could enjoy socialising over a drink.

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

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff acted within the legal framework of the MCA. Staff had completed training in MCA and DoLS and understood the principles of the act.
- Several people living at the service had DoLS in place. DoLS had been appropriately applied for taking into account people's best interests and were subject to regular reviews.
- Staff supported people to make decisions. People were able to make daily decisions relating to food choices, where they wanted to spend their time and what clothes they would like to wear. Staff helped people by presenting choices and options.
- Capacity assessments and best interest decisions were clearly recorded in care plans and notes with the relevant people involved.

# 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

- We observed staff who were caring and compassionate as they supported people. One person told us, "The staff are all nice. They are concerned and look after me. We have a laugh and it lifts my spirits."
- People's faith and wishes were supported. One family member told us, "The Vicar comes from church once a month."
- When we asked people about the atmosphere in The Rivers, comments included, "It's lovely here.", "It's all very sociable." and "I enjoy being here, this is my home."

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

- People were able to express views about their care. One person told us, "They know me and they know I like to be independent. They know what I like to do and what I need help with."
- Family members told us they were involved in developing care plans, "We had a meeting last week about what [relative] likes to watch, likes to wear and eat. I gave them her life history."
- People were in control of their own care and made decisions about what they wanted to do each day. One person told us, "I can do anything I want to do. I like to have a strip wash in the morning. I can do this. I like to go and sit in the lounge with the others. It is nice to have company."

Respecting and promoting people's privacy, dignity and independence

- Staff promoted people's independence and encouraged them to make everyday choices.
- Staff knew how to promote people's privacy and dignity. One person told us, "We follow the person's care plan and when providing personal care, we make sure doors are closed."
- We observed people being supported to maintain their independence whilst eating their lunch. Staff were attentive and responsive to the needs of people, so they were able to maintain their dignity.

# 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 were involved in developing their care plans. Care plans were regularly reviewed to ensure staff had all the information required to offer care and support specific to the person's needs and wishes.
- A 'resident of the day' programme was in place where a full review of all care needs and preferences was carried out. This ensured that care plans were up to date and reflected people's current care needs.
- Care plans detailed people's needs and preferences for all aspects of their care. For example, 1 person preferred to see what the food choices were rather than look at a list, therefore 'show plates' were used at mealtimes.

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. The Accessible Information Standard 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.

- Communication needs for people with sensory loss were detailed in their care plans and regularly reviewed.
- Staff demonstrated they knew how to speak to people with sensory loss.

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 were involved in a programme of planned activities. On the day of inspection this included flower arranging, playing cards, singing and bingo.
- People told us about other activities which had taken place, "I can go to the hairdresser. We had a barbecue, we have games and dominoes and I have played bingo. The care staff are there to help me play bingo as I can't see very well. I like to go into the lounge, I like to sit and hear them talking."
- Families were encouraged to be actively involved in activities in The Rivers. One family member told us, "As a family we are very involved in the care home. [Family member] built the benches in the garden. The activities have improved now. We got the meat from where [family member] works when we had a barbecue."

Improving care quality in response to complaints or concerns

- Complaints were managed effectively and detailed responses were provided to complainants.

- The registered manager took quick and responsive action to concerns raised in staff meetings.

#### End of life care and support

- The service had carried out work to create person-centred, end of life care planning with people. This included developing their personal life stories and life histories with their families.
- People and their families had been involved in conversations to support the planning of their funeral arrangements, including the music they would like to have played at the service.
- There was no one at the home who was receiving end of life care at the time of our inspection. However, where people needed care at the end of their lives, this was provided in partnership with the local district nurse teams and GP.

# 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.

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

- There was a positive, person-centred culture in the service and staff were open and transparent when they talked about the care and support provided to people who lived in The Rivers.
- People who lived at The Rivers were happy. One person told us, "It is lovely, I am happy and want to stay here. The people are nice and I have company." A family member said, "I feel very welcome here. I come in a lot and they always offer me a drink and a biscuit. It is very nice."
- Staff meetings took place regularly across a range of staff groups including care staff, night staff and housekeeping staff. The notes from the meetings were shared with staff.
- Staff were happy working at The Rivers. One staff member told us, "I really enjoy working at The Rivers. It's a lovely place to work and people are well looked after. It is very supportive."

Continuous learning and improving care; 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

- Accidents and incidents were reviewed and analysed to identify learning. For example, the deputy manager had a colour coded falls map which identified hot-spots and common areas where falls happened so changes could be implemented.
- There was an open and honest culture in the service. Staff were open in their conversations and discussions with inspectors.
- The registered manager was aware of their responsibilities under the duty of candour and their duty to be honest and open about any accident or incident which had caused or placed a person at risk of harm.

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

- Monthly performance reports were produced by the registered manager and sent to the area manager to provide assurance about the quality of the service.
- There was a leadership structure in place with clear accountability for managers and staff. Daily flash meetings took place which gave managers a daily overview of the people in the home and key updates. Managers shared this information with staff on duty.
- The registered manager had the skills, knowledge and experience to perform their role. They had a clear understanding of people's needs and good oversight of the service they managed.

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

#### characteristics

- The registered manager had arranged regular meetings for people who lived at The Rivers and also for family members.
- We saw evidence of where suggestions from these meetings had been put into action. For example, there was a request for a bar area for people to have a drink and enjoy the garden in the summer and we saw where the bar area had been constructed.
- We heard from families about the meetings that had taken place. One family member told us, "There have been 2 meetings with relatives and [family member] had one with just residents. I think some of the things put forward in the meetings like activities and staff doing a bit more are good."

#### Working in partnership with others

- The service worked with a range of professional from health and care services. One member of staff told us, "We work with the local GP surgery, district nurses, dieticians and speech and language therapists. We send an update form to the GP surgery on a morning and this works well because daily issues are dealt with quickly for the residents."