

Arthur Bunting

# Ryehill Country Lodge

## Inspection report

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Hull  
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## 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

Ryehill Country Lodge is a residential care home providing personal care to up to 24 people aged 65 and over, some of whom may be living with dementia. 19 people were using the service at the time of our inspection.

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

People benefitted from improvements made to the provider's monitoring and oversight of the quality and safety of the service.

We found the home to be warm and welcoming and we received positive feedback from relatives about the care their family members had received.

Staff had supported people to remain in contact with their relatives during the COVID 19 pandemic and activities had been arranged within the home to reduce the risk of isolation, including celebrating cultural events.

People received their medicines on time and as prescribed and improvements had been made to the management of people's creams. Where appropriate, people were supported to administer their own medicines.

Staff kept people safe from the risk of abuse and managed risks to people's health and welfare.

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 Care Quality Commission (CQC) website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was requires improvement (published 16 October 2019) and there were breaches of regulation. 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 comprehensive inspection of this service on 20 and 23 September 2019. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve their governance systems. 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. The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

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

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service safe?**

**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.

# Ryehill Country Lodge

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection was carried out by one inspector.

#### Service and service type

Ryehill Country Lodge 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.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and we used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

#### During the inspection

We spoke with one person who used the service and we received feedback from six relatives about their

experience of care provided. We spoke with four members of staff including the registered manager, deputy manager, senior care worker and a care worker. We observed care and support to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We reviewed the provider's safeguarding policy and records of staff and resident's meeting as well as communication had with relatives.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

At our last inspection we recommended the provider reviews systems in place to ensure safe management of storage of peoples prescribed creams and record keeping. The provider had made improvements.

- Staff administered people's medicines on time and as prescribed.
- Creams were stored in locked cabinets in people's rooms and staff kept clear records of how these were applied in line with people's prescriptions.
- Staff recognised when people were able to manage their own medicines and put measures in place for people to do this safely. We looked at records for one person who managed their own pain relief medication.

### 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.

### Systems and processes to safeguard people from the risk of abuse

- People were kept safe from the risk of abuse and ill-treatment.
- The registered manager responded promptly to safeguarding concerns and followed local safeguarding procedures.
- Information was available to people about the level of care they should expect and how to raise any concerns.
- Staff recognised the role of advocates in ensuring people received the right support and representation to express their wishes.

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

- Improvements had been made to the way in which risks to people's health and welfare were assessed and managed. For example, measures were in place to reduce the risk of falls and development of pressure ulcers.
- We observed staff supporting people to move safely around the home and the registered manager reviewed every fall to prevent reoccurrence.
- The provider was continuing to make improvements in the home to ensure a safe environment for people. Risk assessments were in place to ensure people were safe whilst work took place in the home.

#### Staffing and recruitment

- Staff were recruited safely and improvements had been made to record keeping to evidence this.
- We observed enough staff deployed throughout the home to respond to people's needs.
- The registered manager responded appropriately and quickly to issues relating to staff performance.



# Is the service well-led?

## Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

At our last inspection the provider had failed to ensure effective oversight and monitoring of the service. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

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

- Improvements had been made to the provider's quality assurance systems and action had been taken to address shortfalls in cleanliness, medication and recruitment.
- The registered manager routinely reviewed accidents and incidents and took action to prevent reoccurrence.

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

- There was a warm and welcoming atmosphere in the home.
- Staff were friendly and appeared to know people well.
- Staff had created a video with people living in home to share with friends and family as a way of keeping in touch during the COVID 19 pandemic. The video showed celebrations that had taken place in the home including birthdays and Mother's Day, amongst other cultural celebrations.
- We received positive feedback from relatives about their experiences of the care their family members had received. Comments included, "We as a family are very pleased with the care [Name] receives. [Name] is very settled and happy there" and "...I couldn't ask for more. The care [Name] is being given is second to none."

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

- Staff included people and those important to them in making decisions about their care and support. One relative commented on the 'excellent communication' had with the provider.
- Staff worked in partnership with health care professionals to provide people with consistent care.
- Staff told us they would report any concerns to the registered manager who addressed issues in an open

and transparent way, involving people and their relatives where appropriate.