

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 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 24 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 and what we found

The laundry facility at the service was small and presented challenges in following good practice guidance. There was no evidence to suggest this had impacted on people's health and well-being.

We have made a recommendation about laundry services.

Procedures to protect people from harm or abuse were in place. One staff member said, "We have constant safeguarding training so I am confident of the process should I witness any abuse." Staff managed people's medicines safely and had in-depth training to assess their skills. Training for infection control had been completed and regularly updated. Recruitment processes were thorough to ensure suitable staff were employed. Risk assessments were completed and reviewed to promote people's safety. The management team had a good system to ensure sufficient staff would be available to meet people's needs and stay safe. A system was in place to monitor any incidents and accidents and learn lessons from action taken.

The Management team provided multiple opportunities to assist people who lived at Riverside Rest Home to pass on their views to the management team. A staff member said, "Any time we want to speak with the manager we are encouraged to do so and give our views on things." The management team had extensive auditing systems to maintain ongoing oversight of the service.

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 good (published 25 February 2019).

Why we inspected

We undertook this targeted inspection to follow up on a specific incident we received about the service. The inspection was prompted in part due to concerns received about personal care, staffing and staff training. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We looked at infection prevention and control measures under the safe key question. We look at this in all 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.

We reviewed the information we held about the service. No areas of concern were identified in the other key

questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We found no evidence during this inspection that people were at risk of harm. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Riverside Rest Home on our website at 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.

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. 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

This inspection was carried out by one inspector and an inspection manager.

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, 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 announced. This was to ensure the management team were available during the inspection visit.

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 commissioning and safeguarding teams. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to

make. We took this into account when we inspected Riverside Rest Home and made the judgements in this report. We used all this information to plan our inspection.

During the inspection

We spoke about Riverside Rest Home with one person, four care staff, two members of the management team and the registered manager. We checked staffing levels, staff rotas, training records and recruitment procedures. In addition, we looked at records related to the management of the service and care records of three people. We did this to ensure the provider had oversight of the service, responded to any concerns and led the home in ongoing improvements.

After the inspection

We continued to seek clarification from the provider to validate evidence found, in terms of and people's care documentation and maintenance records.

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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

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. The laundry facility at the service was small and presented challenges in following good practice guidance. There was no evidence to suggest this had impacted on people's health and well-being. We have also signposted the provider to resources to develop their approach.

We recommend the provider seeks guidance to support good laundry practice.

- 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

Assessing risk, safety monitoring and management

- Staff knew how to support people in an emergency. People had personal emergency evacuation plans which included a diagram of the route to take in case of an emergency. These provided staff with guidance and helped them visualise the support required for people who may have difficulties leaving the home to a place of safety.
- Risks were consistently assessed and managed. The provider had identified risks to people's health and wellbeing, within their care plans. Care plans were individual to the person and had guidance and strategies for staff on how to identify and manage their health risks.
- Documentation had been introduced to monitor and manage people's individual risks. For example, turn charts, food and fluid charts. These were evident and in use, however we advised management should review the new documentation daily to ensure the process was embedded and completed as intended.

Staffing and recruitment

- The management team ensured sufficient numbers of suitably qualified staff were available to meet peoples' needs. Staff confirmed staffing levels were sufficient and they were able to support people in a timely way.
- Safe recruitment procedures we found at our last inspection were thorough and they remained the same.

Staff stated their recruitment was a thorough process and they completed an induction programme prior to commencing work.

Using medicines safely

- Staff managed people's medication safely, including controlled drugs in line with the Misuse of Drugs Act (1971) and associated regulations. They were able to describe good practice and confirmed their skills were regularly checked. A staff member said, "Everyone who administers medication has had training and has it updated all the time."

Learning lessons when things go wrong

- The management team told us the whole team was developing and adapting continuously during the pandemic. This was to ensure the care delivery continuously improved and staff knowledge was enhanced from any lessons learnt from issues that may occur.
- Following a recent incident, the registered manager installed a new call bell system. This was to ensure a more effective and safe alert system for staff to respond to if people required assistance in their rooms.

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 good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager and management team created an open culture and encouraged people to provide their views about how the service operated. A staff member said, "They always engage with residents and ourselves to ensure everybody is alright and how they can improve the home."
- Staff spoke well of the management team and felt valued as members of the workforce at Riverside Rest Home. One employee said, "We are considered, and I feel part of a large family here, with excellent support from the management team. I love working here everyone mucks in,"
- People confirmed there was a warm, friendly environment. Staff worked together and told us the team spirit was good. One person commented, "It's a friendly family home run very well."

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

- There was a clear structure of management at the home and staff demonstrated a good awareness of their roles and duties. The management team scrutinised and implemented changes to their policies and procedures during the pandemic and recent incidents. Staff confirmed this and felt they were clear about their responsibilities.
- The management team completed a wide range of audits on a regular basis. These included infection control, medication and care records of people. This supported the management team to monitor care provision and keep people safe.

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

- The service provided a regular testing scheme for COVID-19 for all staff to follow and inform the management team of their results. They reflected on identified issues transparently and acted to improve each person's wellbeing. For instance, they supported staff when shortages occurred at the home and maintained their safety by being available at any time.

Working in partnership with others

- The registered manager and management team worked closely with health and social care professionals to share good practice and improve care delivery. This was confirmed by discussions with the management team and information received from local social work teams.

