

# Cumbria County Council

# Riverside House

## Inspection report

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Date of inspection visit:  
26 February 2016  
02 March 2016

Date of publication:  
15 April 2016

## 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

We carried out this inspection on 26 February and 2 March 2016. The inspection was unannounced. We last inspected this service in January 2014. At that inspection we found that the provider was meeting all of the regulations that we assessed.

As part of our regulatory activity we found that the provider for the service was not registered correctly with the Care Quality Commission (CQC). We discussed this with Cumbria County Council and they submitted an application to correct their registration details. As part of the county council's registration application we carried out an assessment of Riverside House in October 2015. We judged that the service was likely to be safe, effective, caring, responsive and well-led.

Riverside House provides accommodation and personal care for up to 34 older people. The home is in a residential area of Kendal. It is run by Cumbria County Council.

The home is on three floors with accommodation arranged into three living units and a unit where people receive planned support to regain their independence after an illness or injury. One unit provides support to people living with dementia. There is a passenger lift to help people access rooms, including bedrooms, on the upper floors of the home.

There was a registered manager employed at the home. A registered manager is a person who has registered with the CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

Everyone we spoke with told us that this was a good home and said that they would recommend it to other people.

People who lived at the home were well cared for and safe. They were included in decisions about their care and maintained their independence and control over their lives.

There were enough staff to provide the care people required. The staff were well trained and knew how to keep people safe.

Visitors were made welcome in the home and people could see their friends and relatives as they wanted.

People were supported to maintain good health. They received their medicines as their doctor had prescribed. People were supported to receive appropriate health care.

People were provided with choices of meals, snacks and drinks. Mealtimes were pleasant and sociable occasions.

The staff employed at the home knew people well. They knew the care people required and how they wanted this to be provided.

People knew the registered manager and could speak to her if they had any concerns about their care. The registered manager asked people for their views and people were included in developing the service.

The registered manager was knowledgeable about the Mental Capacity Act 2005 and how to protect people's rights.

## 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.

Care staff knew how to identify and report abuse.

There were enough staff on duty during the day and night to provide the support people required.

Medicines were handled safely and people received their medicines as their doctor had prescribed.

### Is the service effective?

Good ●

The service was effective.

People received a choice of meals, snacks and drinks. Mealtimes were pleasant and sociable occasions.

The staff had received training to give them the skills and knowledge to provide the support people needed.

People agreed to the care they received. The registered manager was knowledgeable about the Mental Capacity Act 2005 and people's rights were protected.

### Is the service caring?

Good ●

The service was caring.

Staff were kind and caring. They took time to spend with people and understood this was an important part of their role.

People were supported to maintain their independence and their privacy and dignity were protected.

### Is the service responsive?

Good ●

The service was responsive to people's needs.

People were included in planning and agreeing to the support they received.

Visitors were made welcome. People could see their families and friends as they wished.

There was a procedure for receiving and handling complaints.

**Is the service well-led?**

**Good** ●

The service was well-led.

People were asked for their views and were included in developing the service.

People knew the registered manager and could speak with her if they needed.

The registered manager had good systems in place to monitor and improve the quality of the service.

# Riverside House

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 26 February and 2 March 2016 and was carried out by two adult social care inspectors.

Our visit to the home on 26 February was unannounced. At that visit we focused on speaking with people who lived in the home, their visitors, care staff and visiting health care professionals. We arranged to return to the home on 2 March to look at records relating to how the home was managed.

There were 29 people living in the home at the time of our inspection. During our inspection we spoke with 16 people who lived in the home, seven visitors, six care staff, two ancillary staff, the registered manager of the home and the provider's operations manager. We observed care and support in communal areas, spoke to people in private and looked at the care records for six people. We also spoke with a health care professional who was visiting people in the home and looked at records that related to how the home was managed.

Some people who lived at the home were not easily able to tell us their views about their care. 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.

Before our inspection we reviewed the information we held about the service. We also contacted local social work and commissioning teams to obtain their views about the home.

# Is the service safe?

## Our findings

We asked people who lived in the home if they felt safe at Riverside House. Everyone we spoke with told us they felt safe in the home. One person told us, "I feel very safe here, it's a lovely place to live".

Some people who lived in the home could not easily share their views with us. We saw that people who were living with dementia appeared comfortable and relaxed around the staff who were supporting them.

We spoke with three people who visited the home regularly. They told us that they had never seen people being treated in anything other than a kind and respectful way. One person told us, "I come at different times and on different days, it's always the same whenever I come, just a nice place with lovely staff doing their very best to look after people". Another person told us, "I don't worry about [my friend] when I leave here, but I did used to worry a lot when they were on their own at home, I'm confident they're safe here and know they are happy".

All the staff we spoke with told us they knew how to identify and report issues about a person's safety or wellbeing. One staff member told us, "You can tell by people's body language if they are unhappy, if I thought anyone was upset or at risk I'd go straight to the supervisor or manager".

One person told us that there had been one occasion when they were unhappy about how a staff member had treated them. They said they spoke to the registered manager and were happy about the actions she had taken.

People told us that there were enough staff on duty during the day and night to provide the support they needed. This was confirmed by what we observed during our inspection. We saw that people received the support they needed and call bells were answered promptly when people used them to request assistance from staff. Visitors we asked told us that they never heard call bells ringing for very long and said the staff in the home were quick to respond when people used the call bells.

All the staff we spoke with told us they had completed training around keeping people safe. They said they regularly had training in moving people safely, fire safety and infection control. They said they were confident people were safe in this home.

Most people who used the service required support from staff to handle their medicines. We saw that safe systems were used to store, administer and manage medicines on behalf of people. Where people were able to manage their own medicines staff worked with them to ensure they could do so safely.

The registered provider carried out checks on new staff to ensure they were safe to work in the home. Staff we spoke with confirmed that all new staff had to complete training and work with experienced staff members before they worked alone with people. This helped to ensure they had the skills to keep people safe.

Records we looked at showed that risks to people's safety had been identified and actions taken to manage the hazards. We observed that the staff on duty knew the actions to take to protect people from the risk of harm.



# Is the service effective?

## Our findings

People who lived at Riverside House made many positive comments about the staff who worked there. They told us that the staff knew the support they required and were able to provide this. One person told us, "The staff are very capable, they certainly know what to do for me".

A visitor to the home told us that they thought all the staff were trained and able to provide good care to people. They told us, "The care staff here are marvellous, they do a very good job".

All the staff we spoke with told us that they were provided with a range of training to ensure they knew how to support people. One staff member told us, "We have induction training when we start and then there is lots of training as you work here that you have to do to keep up to date".

We saw that the registered manager of the home had good systems to identify the training that staff had completed and when this had to be repeated to ensure their skills and knowledge were up to date.

Some people were living with dementia and were not able to make important decisions about their care and lives. The registered manager of the home had a good understanding of the Mental Capacity Act 2005, (MCA) and how to protect people's rights. The 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 Act 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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA.

We saw that the staff in the home assumed that people were able to make choices about their daily lives and respected the decisions that people made. People were asked if they wanted to take their medicines and these were only given with their consent. Where people refused we saw that the staff respected the decisions. We saw there were six people who had a DoLS in place. These had been appropriately authorised by the local authority as the supervisory body. The DoLS had been agreed to ensure the person's safety and welfare.

The home had one unit that specialised in supporting people living with dementia. We saw that specialist advice had been followed in how this unit was decorated to help people to maintain their independence.

People who could speak with us told us that the staff in the home supported them as they needed to attend health care appointments. One person told us they were supported by a relative to attend appointments as there were no staff available to provide this assistance. We discussed this with the registered manager. She told us that while most people preferred their friends or relatives to attend health care appointments with them, a staff member would accompany anyone who did not have the support of family or friends.

Most of the people we spoke with said they enjoyed the meals provided in the home. They said they enjoyed mealtimes as these were pleasant, sociable occasions. Everyone said they had a choice of meals, snacks and drinks throughout the day. We also observed this during our visits to the home. One person told us that they did not always enjoy the meals offered. They said they were provided with an alternative that they did enjoy.

Where people required support to enjoy their meal we saw this was provided discreetly and patiently. We saw that the staff knew the support people required and provided this.

# Is the service caring?

## Our findings

People we spoke with told us that the staff in the home were very caring. One person said, "The staff really care, they 'go that extra mile for you'". Another person told us, "We have brilliant staff here". Some people could not easily tell us their views about how the staff treated them. We saw that people who could not speak with us were comfortable and appeared relaxed with the staff who were supporting them.

Visitors we spoke with told us they had only ever seen the care staff speaking to people in a caring and respectful way. One relative told us, "I've only ever seen the staff treat my Mum how I think they'd want their own Mum treated, this home certainly passes the 'Mum's test'".

During our inspection we saw that the staff were friendly and patient when supporting people. We saw that people enjoyed sharing a joke with the staff. One person told us, "We do joke with the staff, it's important you can share a laugh, it all makes the days so much nicer".

Everyone we spoke with told us that this was a good home and said they would recommend it to other people.

We saw that the staff on duty knew people in the home well and knew the things that were important to them in their lives. During our inspection we saw that one person became anxious. We saw that care staff reminded them that their relatives were visiting later in the day and this reassured them. When we looked at this person's care records we saw there was guidance for staff about how to reassure the person if they became anxious.

Throughout our inspection we saw that the staff spent time with people and understood this was an important part of their role. One staff member told us, "I love my job, it's nice to be able to sit and talk to people when we can".

We saw that support was provided in a way that respected people's privacy and dignity. All personal care was provided in private and the care staff ensured that doors to toilets and bedrooms were closed while people were receiving care. The staff we spoke with were able to describe the actions they took to maintain people's dignity such as while helping people to bath or when they were providing care. One staff member told us, "It's not rocket science, you just treat people as you want to be treated, close the curtains and doors, don't have people standing around undressed when they are going for a bath".

We saw that the staff supported people to maintain their independence and control over their lives. People agreed to the support they required and could refuse any aspect of their care if they wished. We saw that where people required items of equipment to support their independence the staff ensured these were always available when they needed them.

The home was clean and fresh smelling with no unpleasant odours. Visitors we spoke with told us that they never noticed any unpleasant smells in the home. One relative told us, "You won't find a cleaner home, I

don't think the cleaners ever stop working, it's always like this, clean and fresh". This helped to protect people's dignity.

Most people we spoke with said they had relatives or friends who would support them if they needed assistance to make a decision or to express their wishes. One person told us, "My daughter comes most days, if I had any problems I'd speak to her". The registered manager had information about local advocacy services that could support people to express their wishes if they needed this. Advocates are people who are not connected with the home who can support people to make decisions or to express their views.

## Is the service responsive?

### Our findings

People who could speak with us told us that the service was responsive to their needs and wishes. People told us that they knew the registered manager and that any requests they made were usually actioned. During our inspection we noticed that areas of the home were being decorated. One person told us that the fumes from the paint made them uncomfortable so they had requested a temporary move to an area that was not being decorated. They told us that the manager had given them a choice of available rooms away from the fumes. They said they had been given the opportunity to look at the various rooms and to decide which they wanted to use.

A visitor to the home told us that the only area of concern they had ever had was regarding the décor in the home which was "worn and tired". They said they were pleased to see that the home was being redecorated and commented on the improvements to the environment.

Everyone we spoke with told us that the registered manager listened to their views and took action in response to any requests they made. The registered provider had a procedure for receiving and responding to complaints. A copy of the complaints procedure was included in the information given to people who lived in the home. We saw that the complaints procedure was also displayed in the home and was available on the registered provider's website. This meant it was available to people if they wished to make a complaint.

Most of the people we spoke with told us they had never needed to make a formal complaint about the service provided. People told us that, if they had any concerns, they would speak to the registered manager and were confident she would take action in response to their concerns. One person told us that they had made a formal complaint about the actions of a staff member. They said that the registered manager had listened to their concern and resolved this to their satisfaction.

People who lived in the home told us that their families and friends could visit them whenever they wanted and were made welcome in the home. Visitors we spoke with confirmed this. One person said, "I visit nearly every day and the staff always make me very welcome".

Each person who lived in the home had a care plan that detailed the support they required and how they wanted this to be provided. Some people told us that they liked their relatives to be included in meetings where their care was discussed. They said the registered manager was happy to arrange the meetings for when their relatives could attend.

We saw that the care plans included information for staff about the person's life before they moved to the home and about the things that were important to them in their lives. This meant the staff had information about the person and their life, not just about the care they required. We saw that the staff in the home knew the people they were supporting and the choices they had made about their care. The staff used this knowledge to engage people in conversation and to reassure people when they were feeling anxious.

Most people we asked told us that their care was reviewed and discussed with them regularly. One person said they remembered that their care was discussed when they first moved to the home. They said they could not remember if it had been discussed with them since. When we looked at their care records these showed that their care plan had been reviewed regularly and that they had signed the plan to show they agreed to this.

## Is the service well-led?

### Our findings

People who lived in the home and the visitors we spoke with told us that the service was well managed. Everyone we spoke with said they knew the registered manager and that she was committed to providing a good quality service. One visitor told us, "[The registered manager] is very good at her job, you just feel that she wants things to be right for people". Everyone we spoke with told us that they could speak with the registered manager when they wished to. One person told us, "[The registered manager] has an "open door" policy, I can see her whenever I want, if she's not here when I visit she'll ring me when she's back in the home, she is really very good".

People who lived in the home told us that they were asked for their views about the service. Some people said they attended regular meetings where the support and facilities provided were discussed. They said they could request any changes at the meetings and these were usually agreed. Other people told us they knew the meetings were held but had decided not to attend. They told us that they would speak directly with the care staff or with the registered manager if they wanted any changes to the support they received.

We saw that notes were taken at the meetings and these were available at the entrance of the home for people who lived there and their families to read if they wished. These showed that action had been taken in response to the views of people who lived at Riverside House. We saw that menus had been discussed and people had confirmed they preferred the new meals. We also saw people had been included in choosing the new décor, in planning activities and in redeveloping and designing the garden area.

The registered manager had good systems for assessing and improving the quality of the service. We saw that they had assessed and increased staffing levels to ensure people received the support they needed. They had also identified improvements they wanted to make to the décor of the home and these were being carried out when we visited the service. At the time of our inspection the registered manager was distributing quality questionnaires to gather people's views. She told us that these would be used to identify further areas where the service could be improved.

The staff we spoke with said the registered manager set high standards. They told us that they were proud of the home and enjoyed working there. All of the staff we spoke with told us that they were well supported by the registered manager and by the supervisors employed in the home. One staff member told us, "I've worked at other homes but the support here is the best I've ever had". Another staff member said, "This is the best job I've had...I know I'm valued here".

The provider's operations manager carried out regular visits to the service to assess the quality of the care provided. This helped the provider to maintain oversight of the home.

Providers of health and social care services have to notify the CQC of important events that happen in their services. The registered manager of Riverside House had informed us of significant events as required, this meant that we could check that action had been taken.