

Mrs C Day and Mr & Mrs S Jenkins

Riverside Court

Inspection report

Bridge Street
Boroughbridge
York
North Yorkshire
YO51 9LA

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Tel: 01423322935

Website: www.riversidecourtresidentialcarehome.net/

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Riverside court is a care home providing accommodation and personal care to 18 people aged 65 and over at the time of the inspection. The service can support up to 25 people. The service is within one adapted building with accommodation and communal facilities over different floors.

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

People felt safe and well looked after. All areas were clean, tidy and there was sufficient cleaning taking place to keep people safe from the risk of infection. Relatives felt assured their family members were safe and supported well, especially during the pandemic.

Care plans and risk assessments were in place for people's support needs. People and their families confirmed that they were able to contribute their views on care and support.

Systems were in place for the assessment, monitoring and mitigation of risk towards people who used the service. The manager analysed people's weights, any falls or incidents to ensure learning from events was undertaken. This meant risks to people's health and safety were reduced.

Staff were patient, kind and respectful towards people. Care was person-centred and staff had time to organise activities and talk with people during the day.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

The manager in place wasn't registered with us. However, steps had been taken to begin the registration process. The manager provided leadership and oversight within the service. One relative told us, "The management have covered the staffing during the pandemic putting measures in place before lock down and maintained them. Allowed me to drop parcels off once a week and visit in the summer. I don't suppose they could of done any better."

For more details, please see the full report which is on the Care Quality Commission (CQC) website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (14 August 2018).

Why we inspected

The inspection was prompted in part due to concerns received about people's nutrition, hydration and pressure care. A decision was made for us to inspect and examine those risks.

We undertook a focused inspection to review the key questions of safe effective and well-led only. 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 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.

We found no evidence during this inspection that people were at risk of harm from these concerns. 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 Court care 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?

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 well-led?

The service was well led.

Details are in our well led findings below.

Good ●

Riverside Court

Detailed findings

Background to this inspection

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 assistant inspector.

Service and service type

Riverside Court 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 in place who was applying to be 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 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 who work with the service. 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 the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with four relatives over the telephone. We spoke with the registered provider, the manager, two members of care staff and the cook.

We walked around the service and observed care and social interactions throughout the service using infection, prevention and control and socially distanced practices.

We reviewed a range of records. This included four people's care records relating to skin pressure care, daily notes, food and drinks, incidents and four people's medication records. We looked at four staff files in relation to recruitment and staff supervision. We looked at a variety of records relating to the management of the service.

After the inspection

We continued to seek clarification from the registered manager to validate evidence from the inspection.

Is the service safe?

Our findings

Our findings - Is the service safe? = Good

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. One relative told us, "I have absolutely no concerns or anything, when I would ring to talk to my relative, staff would say 'let me just get my PPE on' or 'I've just come out of a room, I need to change all my PPE before I go in.'
- 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

- Staff were trained in safeguarding and had the skills and knowledge to identify and raise concerns internally and to relevant professionals.
- The manager was aware of their responsibility to liaise with the local authority if safeguarding concerns were raised.

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

- People's care plans included risk assessments. These provided staff with a clear description of any risks and guidance on the support people needed.
- The manager monitored and analysed accidents, incidents and safeguarding concerns to aid learning and reduce the risk of them happening again.
- The environment and equipment were checked for safety and maintained. Emergency plans were in place to ensure people were protected in the event of a fire.

Staffing and recruitment

- Staff were recruited using robust processes to reduce the risk of unsuitable staff being employed.
- There were enough staff on duty to meet people's needs. We observed that the service was calm, quiet and

well organised. Call bells were responded to swiftly and staff had enough time to chat with? people.

Using medicines safely

- People received regular medicine reviews with their GP and other healthcare professionals.
- Medicine administration records (MARs) were clear and completed fully. People received their medicines as prescribed, at the right time.

Is the service effective?

Our findings

Our findings - Is the service effective? = Good

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.

At the last inspection this key question was rated as good. At this inspection this key question remains the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's nutrition and hydration needs were met, and people were provided with a varied and nutritionally balanced diet.
- Staff were aware of people's dietary needs. People who required a specialist diet were supported well and their care plan had details and professional guidance to follow.
- Where people needed support maintaining their weight, additional support was sought and referrals made to other healthcare professionals.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's preferences, care and health needs were assessed and regularly reviewed.
- Any changes to people's needs were reviewed with them and their relatives or advocate and this was reflected in their care plans.

Staff support: induction, training, skills and experience

- People were supported by staff who were appropriately trained. Staff told us they valued the training on offer.
- New employees completed an induction handbook and shadowed more experienced staff as part of their introduction to the role.

Staff working with other agencies to provide consistent, effective, timely care

- The service worked regularly with external professionals, such as speech and language therapists and GPs, to support and maintain people's health.
- People had detailed hospital passports in place. These shared important information with healthcare professionals.

Supporting people to live healthier lives, access healthcare services and support

- Referrals were made to other healthcare professionals, where appropriate, in a timely manner.

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

- Riverside court is an old building that has been adapted and is accessible.
- The outside area of the home was accessible, appropriate for people living with dementia, with signage

and a well-used and maintained decking area.

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 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 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Health professionals completed capacity assessments to ensure people were supported appropriately to make decisions.
- Staff ensured people were involved in decisions about their care; they understood their role in making decisions in people's best interests.
- Where people did not have capacity to make decisions in an area of their life, they were supported to have maximum choice and control.
- People who could were asked to give consent to their care and treatment; we saw this was recorded in care files.

Is the service well-led?

Our findings

Our findings - Is the service well-led? = Good

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.

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

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

- People were supported to make plans and discuss any changes to their support; their relatives would be included also if appropriate.
- Staff spent time listening and talking to people. Staff engaged with people in a dignified way. Private conversations and care were conducted respectfully.

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 registered manager understood their responsibility to be open and transparent and apologise to people if things went wrong.

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

- There was good communication with people and families.
- There was a positive rapport between people, support staff and management. One relative told us, "The management is effective and I am content. I have absolutely no concerns. It makes us happy that our relative doesn't think it's a care home, it's nice and feels like a hotel so they are happy too."
- During the corona virus pandemic the service had used phone calls, emails and IT (virtual meetings) to ensure people and relatives remained in contact with each other.

Working in partnership with others

- The registered manager had worked closely and collaboratively with the local authority and other professionals to make improvements and develop the service.