

# RIVERVIEW LODGE

# FINDINGS OF CQC VISIT

28 November 2018



### Introduction

Each time the Care Quality Commission inspects a care home, it issues an inspection report. This gives feedback on what inspectors found and what recommendations they make to the people who manage the home. From this, the providers need to produce an action plan, which needs to be agreed with the CQC.

At MHA, we took the decision to make a summary of our action plan public for all inspection reports as we want to be open and honest with our residents and their families and friends. In this action plan, you can read what the inspectors said to us and what our response and actions to those are.

In addition, you can also see what our residents, their families and friends have said about our homes on our care home web pages at www.mha.org.uk. There you will find the latest reviews about our homes that are posted on the independent website www.carehome.co.uk









### Is the service safe?

### What did the CQC inspection tell us?

#### The service was safe.

- ▶ Risk assessments were clearly linked to guidance in people's care plans about how to manage identified risks.
- ▶ Staff we spoke with understood the principles of safeguarding adults, how to recognise the signs of abuse, and what to do if they had any concerns.
- Medicines were well managed and recorded.

### Is the service effective?

#### What did the CQC inspection tell us?

The service was not always effective.

- ▶ Although people were offered choice at mealtimes, they had not been consulted or involved in developing the menus they were offered.
- ▶ The requirements of the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards 2007 had been met.
- Staff members received the training and support they required to carry out their duties effectively.
- People were supported to maintain good health and to access health services when needed.

### Our plan of action

#### Making the service effective

- ▶ Prior to implementing the MHA seasonal menus, we will discuss the menus with residents and take any changes into consideration. We will undertake a 'Tasting of Dishes' so residents can understand what the dishes are.
- ▶ All staff will continue to receive Mental Capacity Act and Deprivation of Liberty Safeguards (DoLS) refresher training to enable them to meet the requirements of the Mental Capacity Act 2005.
- Learning and development play an important role in ensuring our employees are equipped with the right skills and knowledge to carry out their job roles successfully, and to ensure MHA remains at the forefront of providing quality and innovative care to the older people who use our services.
- Our residents will always be supported to maintain good health and to access health services when they need to.

# Is the service caring?

#### What did the CQC inspection tell us?

#### The service was caring.

- People and family members told us that they were satisfied with the care provided by staff.
- ▶ We observed that staff members respected people's privacy and dignity.
- ▶ Staff members spoke positively about the people whom they supported, and we observed that interactions between staff members and people who lived at the home were caring and respectful.
- ▶ People's religious needs were respected and supported.

### Is the service responsive?

### What did the CQC inspection tell us?

The service was not always responsive.

- Care plans did not always include up to date information about people's health care needs.
- ▶ One person's behavioural charts did not always show if staff members had followed the guidance contained in their care plan.
- People were supported to participate in a range of individual and group activities.
- ▶ The service had a complaints procedure and people and family members knew how to make a complaint.

# Our plan of action

#### Making the service responsive

- ▶ All care plans will be reviewed to ensure all health care needs are up to date and these will be monitored as part of our care plan audit.
- ▶ All staff will be provided with refresher training to a have better understanding of how to record behavioural charts. There will be clear guidance in the care plans for staff to follow when caring for residents who have behaviour that challenges.
- ▶ A wide range of meaningful activities will always be provided for our residents.
- A complaints procedure will always be displayed in the reception for all visitors and family members to read how to make a complaint.

### Is the service well led?

#### What did the CQC inspection tell us?

The service was not always well led.

- ▶ Although systems were in place to monitor the quality of the service, we noted that these had not always identified failures to ensure that information in relation to people's health needs were recorded in their care plans or that staff members always followed guidance in relation to behavioural support.
- ▶ The registered manager demonstrated leadership and accountability. She was approachable and available to people who used the service, staff members and visitors.
- ▶ Staff members told us that they felt well supported by the manager. People and family members of people who used the service felt that the home was well managed.
- ▶ The registered manager had a good working relationship with health and social care professionals and organisations.

# Our plan of action

### Making the service well led

- Staff will be provided with guidance to complete effective care plan audits and will be monitored closely by management.
- ➤ The registered manager will keep leading the staff team to provide a high standard of care. She has an open door policy, and will therefore always be approachable and available to people who use the services, staff members and visitors.
- The manager has an open door policy and welcomes feedback from residents and relatives.
- ► The registered manager will keep building the good working relationships with health and social care professionals and organisations.