

Inspection Report on

Rickeston Mill Care Home

Rickeston Mill Nursing Home Rickeston Bridge Haverfordwest SA62 3DJ

Date Inspection Completed

14/02/2023



About Rickeston Mill Care Home

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	Rickeston Care Home Itd
Registered places	28
Language of the service	Both
Previous Care Inspectorate Wales inspection	04/08/2022
Does this service provide the Welsh Language active offer?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People who have made Rickeston Mill their home receive their care and support from a team of motivated staff. There is information available for care staff to understand how best to meet people's care and support needs. Care staff are knowledgeable, respectful and treat people with dignity.

People appear to be satisfied with the support they receive and relatives said that they are very happy with the care provided, feeling staff know people well and are aware of their particular likes and preferences. People's health needs are understood by care staff and timely referrals are made to seek advice and guidance when needed. The home is supported by a range of visiting health professionals to help ensure people receive the care they need to remain as healthy as possible.

The provider has oversight of the service and there are systems in place to ensure the quality of care is monitored.

Well-being

Staff treat people with respect and are committed to making a positive difference to the lives of the people they care for. People and relatives are complimentary of the staff and we observed care staff providing assistance calmly, with dignity and respect. Care records are comprehensive and reviewed regularly. We spoke with people living in the service, with relatives and staff and saw documentation which showed referrals to relevant health care professionals are made promptly. Care staff have good knowledge of people's needs, referred to people in a positive way and it was clear they knew the people they supported well. This was confirmed by family members we spoke with. We saw, on several occasions, care staff sitting with people, interacting with them well and taking an interest in their personal well-being.

People's care preferences and routines are identified in their personal plans and all care staff we spoke to had a good knowledge of these. A range of assessments and personal plans guide care staff on how to meet the individual needs of people living in the home. Daily records show that people receive the care and support they need, in line with their personal plans. Records show that people receive their prescribed medication. The service promotes a good standard of hygiene and infection control to reduce the risks of cross infection.

People are supported to exercise choice and control over their every-day lives. We observed people sitting in various areas of the home and enjoying the company of others if they wished to. We saw care staff interacting with people in a considerate way and that they were respectful of people's wishes. People are supported to take part in both communal and individual activities of their choice. There is choice regarding meals and people told us they could get up and go to bed when they wished.

There are systems in place to help protect people from harm. Care staff are visible and attentive to people's needs. Equipment is in place, as needed, to promote people's safety and comfort. Staff complete training in relation to safeguarding vulnerable adults. Care staff respond promptly to people's requests for assistance. They receive mandatory and specialist training that supports them in their roles.

People live in clean and comfortable accommodation. They have access to a garden, two lounges and a dining area. Communal and private rooms are homely and generally well furnished. Equipment is regularly serviced to ensure it is safe for use. Environmental safety measures are in place and health and safety checks are carried out.

Care and Support

People receive care and support from an attentive team of staff. Social interaction is encouraged and we saw care staff responding to people's needs and requests promptly and in a dignified and respectful way.

Assessments are carried out to ensure the service can cater for people's particular needs before they move in. Risk assessments and personal plans outline how people's care and support needs should be met, taking into account their care preferences and routines. Personal plans are reviewed and updated regularly. Records show that people receive input from medical and specialist services as needed, to promote their health and wellbeing.

There is an understanding of the importance of good nutrition. The catering staff take pride in their work and know the important role they have in people's care and well-being. Nutritionally balanced ready prepared frozen meals are provided for main meals and a choice of these is always available. We were told that if people do not want the meals offered a choice of alternatives can be made up for them. We were told that food is available outside meal times, and food is fortified as necessary. Fresh fruit is available to people and special events are celebrated. We saw that some people took their meal in the dining room whilst others ate theirs in the two lounge areas. We saw care workers assisting people in a sensitive way and that people were not rushed at mealtimes.

People are encouraged to participate in things they enjoy. During the inspection we saw some people engaged in singing, some were watching television and some were taking part in individual activities such as colouring and reminiscing. There is a designated activities worker who assists people to participate in activities such as arts and crafts and in gardening activities.

Environment

People live in a service that is suitable for their needs. Accommodation is provided over two floors and there is a lift for people to use to move between floors.

There are a number of communal areas, including the dining room and two lounges. These were seen to be well maintained, uncluttered and clean. Because of the age of the building, bedrooms are different shapes and sizes. We saw that bedrooms had been personalised with photographs, ornaments and soft furnishings. All bedrooms seen were clean and comfortable with no malodours. Standards of cleanliness throughout the home are generally good and there has been an increase in the amount of cleaning time since the previous inspection.

The dining room now benefits from the provision of blinds at the windows and communal areas have been painted and decorated since the previous inspection. Bathrooms were seen to be clean, accessible and uncluttered.

There is a safe enclosed outdoor area which is accessed from the dining room. We were told that the activities co-ordinator would spend time assisting people to access this area to engage in activities such as planting flowers or to enjoy sitting outside when the weather permits. The home sits in extensive gardens which we were told were due to be further developed in order to make them more accessible to people.

People can be confident they live in a safe environment. The main entrance is secure, our identification was checked and we were asked to sign the visitor's book before we were permitted entry. People's care documentation is kept electronically, and this is password protected.

Leadership and Management

Governance arrangements are in place to monitor the quality of the care provided. The Responsible Individual (RI) visits the service and keeps in regular telephone contact.

Systems are in place to make sure equipment and services are suitably maintained and the maintenance worker carries out visual checks on equipment and can carry out some repairs.

Care staff are appointed following a recruitment process which includes references, Disclosure and Barring Service (DBS) checks and photographic identification. The overseas staff are recruited via an agency and the service works with them to ensure all of the required checks are carried out.

Care staff feel they have had the training they need to safely and effectively carry out their duties and additional training is provided as necessary. Some training is carried out online with an assessment to make sure staff have the necessary competencies. The training matrix shows most training is up to date and care staff meet with a senior colleague for supervision, where they get feedback on their work.

Staff said they feel valued and part of the team. Catering and housekeeping staff feel involved and consider their important role in the service is recognised and respected. Recently appointed care workers also feel part of the team and appreciate the support they have had from the rest of the staff team.

We spoke with care staff, people living at the home and their relatives, who told us they felt there was generally enough staff on duty to meet people's needs effectively. Throughout the inspection we saw care staff sitting with residents in the two lounges, talking with them and interacting well. We saw mealtimes where care staff supported people and encouraged them with their meals. We also viewed care staff helping people to move throughout the home appropriately, with compassion and in an unhurried and relaxed way.

Governance arrangements are in place and ensure the service meets the requirements of the regulations. A range of audits and checks are in place and we saw the RI had carried out regulatory requirements with regard to visiting the home.

Summary of Non-Compliance			
Status	What each means		
New	This non-compliance was identified at this inspection.		
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.		
Not Achieved	Compliance was tested at this inspection and was not achieved.		
Achieved	Compliance was tested at this inspection and was achieved.		

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)			
Regulation	Summary	Status	
N/A	No non-compliance of this type was identified at this inspection	N/A	
73	The last visit the RI has made to the service was on 20/04/2022. He has not visited the home at least every 3 months in order to meet with people and staff and to gain direct feedback about the service.	Achieved	
44	Parts of the home continue to be in need of redecoration and refurbishment.	Achieved	

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement			
Regulation	Summary	Status	
N/A	No non-compliance of this type was identified at this inspection	N/A	

Date Published 22/06/2023