

Inspection Report on

Richmond House Care Home

**71 Brighton Road
Rhyl
LL18 3HL**

Date Inspection Completed

22/05/2024

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About Richmond House Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Richmond House (Rhyl) Ltd
Registered places	35
Language of the service	English
Previous Care Inspectorate Wales inspection	10 February 2022
Does this service promote Welsh language and culture?	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 receive care from a care staff team who have worked at the service for several years. This is positive because they know people's care needs, choices, and routines. People respond well to care staff because they are kind, patient and encouraging. We saw care staff supporting people throughout our visit. Personal plans are clear, and available for staff, who update these records while they sit with people. There is a varied choice of healthy and nutritional meals and snacks and people are encouraged to choose their preferences. The cook knows people well and prides themselves on the high-quality food and varied menus provided, which are seasonal and planned around individual dietary needs.

There is a full-time activities coordinator and allocated care staff undertake activities on their days off. People are given a varied choice of activities which are fun and stimulating. Health appointments and care reviews are regular and arranged when care needs change or when due. Visiting is planned so that visiting times are staggered, and this has a positive effect on people living with dementia. There are four communal lounges for people to choose from. The garden is organised to ensure people can go outside in all weathers. Storage is well organised and discreet.

Well-being

People have control over their day to day lives and are treated with dignity and respect. They choose how and where they spend their day, with whom and whether they get involved in the activities offered. Care staff encourage people to make choices about meals. Management review and update care plans, which include information about how people want to spend their time. The environment is organised to enable people to have as much choice as possible. For example, there are quiet rooms available and also a television room where people can choose to watch films.

People are as healthy and active as possible. Health is monitored on a regular basis or when care needs change. Care staff know people well and take action to make appropriate referrals to health professionals for guidance and advice when required. Management have good oversight of individual care needs and ensure care records reflect this. The environment is set out and organised to enhance people's physical and mental health and well-being.

People are encouraged to stay in touch with family and friends. Care staff encourage and facilitate visits to ensure there is a steady flow of visitors, and to avoid all visitors turning up at once. Management monitor footfall to ensure people's well-being is maintained. There is a visitor's room available which is spacious, warm and homely.

People live in an environment which supports their well-being. Rooms are organised to reduce risk. There is plentiful equipment available for individuals to remain mobile and avoid the risk of falls. Care staff are alerted at night to people's need for support by sensor mats in their rooms. The garden is set out with seating for all. Communal bathrooms are free from dangerous products. Individual dignity is maintained because bedrooms are organised discretely and are clean.

Care and Support

People's personal plans are detailed, up to date and clear. Care needs are met because care staff know them well and follow the care records as guidance. Personal care plans are fundamental in instructing carers on how to deliver care and these are reviewed effectively and in a timely way. Communication between staff is effective and handover sheets are completed to alert staff of any changes or issues arising.

People are provided with care and support they need through consultation with them, their family, and professionals. Their preferences, personal wishes and specialist needs are respected and provided. We saw how people have choice about daily routines, meals, and activities. A menu illustrates meal options available and when mealtime was observed we saw evidence of this. An activities co-ordinator ensures a variety of stimulating activities, including opportunities to exercise through dance. People were engaged and smiling while they participated, some chose only to watch. We observed care staff engaging with people and prompting them to get involved in activities if they wanted to. We observed people being attended to and cared for throughout our visit.

People are supported to access health services to maintain their health and well-being. Care records demonstrate varied health professionals, including general practitioners (G.P.'s), district nurses and chiropodists. We found records are reviewed and updated when health professionals provide advice and guidance. We observed telephone calls between management and health professionals regarding health appointments and visits. People told us they are cared for well. We saw people were all in the communal areas and enjoying each other's company. Some people were having their hair and nails done, which is good in promoting and maintaining people's well-being.

Hygiene practice is maintained in order to reduce the risk of infection. Care staff and management follow up to date policies and procedures. There are sanitisation stations throughout the home. Visitors are encouraged to sanitise their hands when entering the home. Friends and family arrange visits via appointment. Management report staggered visits are beneficial for people living with dementia, who seem more settled due to managing and staggering the footfall into the service. The service is cleaned thoroughly daily.

Environment

The service is spacious and light. The entrance is secure and there is a book for visitors to sign as they enter the building, for fire safety purposes. The communal living rooms and dining rooms are planned and situated to enable people to mobilise and socialise with ease. There are several technology gadgets available for people to keep them entertained. These include radios, computer interactional computers, clocks and televisions. There are therapeutic rooms where people can have their hair or nails done. There is a therapeutic bathroom available, with a specialist bath and relaxing lighting. There are quiet areas for people to relax if they choose to. There is a visiting room which is spacious and also a television room, where we observed people and care staff, singing along to the music of a film. Communal bathrooms are clean and products are stored safely. The outdoor space is pleasant and provides seating and a gazebo in the summer months. There are orientation signs including photographs in memory boxes outside the door of the people's rooms. A summary of care information sheet is discreetly placed behind the photograph to remind care staff.

There are systems in place to monitor and reduce risks to health and safety. There is walking equipment and hoists available to assist people to be mobile. The call bell system is reliable and non-intrusive. Care staff are effective in responding to calls for assistance and always carry call system devices. The environment is monitored regularly to ensure safety. Regular fire and water checks are undertaken, monitored and recorded.

Leadership and Management

There are governance arrangements in place to support the smooth operation of the service and ensure quality of care required to enable people to achieve their well-being outcomes. The responsible individual works closely with the manager and deputy manager to collate feedback to inform their ongoing improvement program. People, their relatives, staff and visiting professionals are asked for feedback on their views about the service. The sample of feedback we viewed shows positive feedback and satisfaction with the service. A quality review is undertaken annually, and this demonstrates consideration has been given to the feedback and information gathered throughout the year. Regular staff and residents' meetings take place to inform the monitoring of the service. Care staff are encouraged to develop in their career. They told us they feel supported and encouraged within their role. Some are supported to undertake studies to advance their career.

The service ensures that there are enough staff available to provide good quality care. We viewed a sample of rota's which show there is sufficient staffing. Care staff have worked at the service for many years. Care staff files show care staff are recruited safely and the required checks are undertaken. Supervision records show care staff receive supervision on a regular basis and receive regular face to face and online training.

The financial oversight of the service is undertaken effectively. The responsible individual visits the home almost daily and monitors the environment, which is well maintained. The occupancy of the service is steady. We spoke with the cook who told us food supplies are plentiful. We saw fresh food and varied meals and snacks are prepared throughout the day. Investments in entertainment items, for example, televisions and interactive computers have been made and we saw various areas of the service being maintained, including fire doors.

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

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
33	The service provider has not always ensured people living in the home have access to health and other services when needed.	Achieved
25	The service provider has not ensured that all individuals are treated with respect and sensitivity, with due regard to their privacy and dignity.	Achieved
16	Personal plans have not been reviewed as and when required but at least every 3 months.	Achieved

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