

Mrs A Hurley

Rowan House

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Rowan House is a residential care home providing personal care for up to 16 people aged 65 and over who could be living with dementia or have other mental health needs. At the time of this inspection there were 13 people living in Rowan House. The home accommodated people on two floors in an adapted residential building.

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

People were happy living at Rowan House. They told us they were well looked after, got on well with the staff, the food was good, and they had no complaints.

We found the provider ensured people were supported safely. There were sufficient numbers of suitable, motivated staff. Processes and procedures were in place to store and administer medicines safely. We were assured infection prevention and control measures were in place to protect people against the risk of COVID-19 and other infections.

The service was well led. The staff team felt supported by the provider and manager. People who used the service and staff could contribute their views on how the service was managed. The manager had processes in place to monitor and improve the quality of service people received.

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

Rating at last inspection

The last rating for this service was good (published 27 November 2018).

Why we inspected

This was a planned inspection based on the previous rating, and in part due to concerns we received about medicines and staffing. As a result we undertook a focused inspection to review the key questions of safe 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.

The overall rating for the service remained good. This is based on the findings at this inspection.

We found no evidence during this inspection that people were at risk of harm or poor care. Please see the safe and well-led sections of the full report.

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 COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Rowan House 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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Rowan House

Detailed findings

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

One inspector carried out this inspection.

Service and service type

Rowan House 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 registered with CQC. The registered manager was also the provider. This means one person is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave a short period notice of the inspection to check the COVID-19 status of the home, and to check we would be able to comply with social distancing and other pandemic requirements during the visit.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included notifications of events providers are required to tell us about, and information from members of the public about their experience of the service.

During the inspection

We spoke with five people who used the service about their experience of the care provided. We spoke with the provider who was also the registered manager, the home manager and two members of staff.

We reviewed a range of records. This included three people's care records and medication records. A variety of records relating to staff recruitment, the management of the service, and monitoring and audits, were reviewed.

After the inspection

We continued to seek clarification from the manager to validate evidence found. We looked at records sent to us by the home manager.

Is the service safe?

Our findings

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 good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe in the home. Staff were aware of the risks of abuse and poor care, and what to do if they were to witness or suspect instances of abuse. Staff were confident if they were to raise a concern it would be dealt with appropriately.
- The provider had suitable policies and processes, including for safeguarding and staff whistleblowing. Where a concern had been raised, the provider had cooperated with other agencies, such as the local authority safeguarding team.
- Where a person had a "do not resuscitate" form in place, this had been completed with their knowledge and agreement. The provider took steps to safeguard people's human rights.

Assessing risk, safety monitoring and management

- The provider had processes to identify, assess and manage risks to people's individual safety and wellbeing. These included risks associated with falls, infections, scalds, skin health and the use of bed rails. People had individual evacuation plans for the event of an emergency in which they had to leave the home for a period.
- The provider assessed and managed risks associated with the environment in which people lived. These included infection control risks during the COVID-19 pandemic. A recent independent fire risk assessment had found no major concerns, and the provider had completed actions identified to improve fire safety.
- The provider took into account the risk of legionella, a potentially fatal infection, in their internal risk assessments. However, there had not been a recent legionella risk assessment by an independent competent person. We discussed this with the home manager, and they arranged for an independent risk assessment to be carried out in the week following our visit.

Staffing and recruitment

- There were sufficient numbers of staff to support people safely and in line with their needs. Where the provider relied on agency staff, they were familiar with the service and the people living at Rowan House. Agency staff were assigned exclusively to Rowan House and followed the same regime for COVID-19 testing as permanent staff.
- The provider had a very robust recruitment process. The process included the necessary checks to make sure applicants were suitable people to work in the care sector, and a period of probation during which their suitability to work in the home was assessed.

Using medicines safely

- People received their medicines safely and in line with their prescription. Staff who administered medicines had appropriate training and their competency was checked. Medicines records were complete

and up to date.

- Staff managed and stored people's medicines safely and securely. There were appropriate guidance and protocols, including for medicines to be taken "as required" and controlled drugs. For medicines not in blister packs, staff recorded the date the package was opened.

Preventing and controlling infection

- The provider managed the control and prevention of infection in line with government guidance, including regular audits and an annual statement. Processes and procedures were updated in line with new COVID-19 requirements.
- 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 personal protective equipment (PPE) effectively and safely.
- 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.

Learning lessons when things go wrong

- Staff understood the need to report accidents and incidents. The reports were followed up to identify any trends, patterns and learning to improve people's care and support.

Is the service well-led?

Our findings

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 good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider was also the registered manager. They worked closely with the home manager to create a friendly, open and comfortable atmosphere in the home. Staff felt supported to deliver high quality care that led to good outcomes for people. People told us they were very happy with the service they received, and this was confirmed by a satisfaction survey undertaken in August 2020.

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 and home manager were aware of the need to be honest and transparent in the event of certain notifiable events.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Staff were clear about their roles. All staff received a copy of the code of conduct for healthcare workers and a job description specific to their role in Rowan House. Two care assistants had been promoted to senior supervisors. They were clear about their additional responsibilities.
- There was a system of regular checks and audits to monitor the quality of service provided. The home manager had developed a workbook to track the regular checks they carried out. This included monthly care plan audits to check people's care continued to meet their needs.
- The home manager was aware of reporting requirements, including new ones which had been introduced during the COVID-19 pandemic. These included regular updates on people's testing and vaccination status.

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

- The provider involved people who used the service and their families where they could. There were two to three residents meetings each year, with the most recent in January 2021. Where people found it difficult to engage with staff wearing masks, staff took this into account by making sure they spoke clearly, or by writing things down for people to see.
- Staff felt engaged and involved. There were regular supervision meetings which were opportunities for two-way conversations. The most recent staff meeting was in January 2021.

Continuous learning and improving care

- The home manager kept up to date with current guidance and standards through local professional forums and online resources. They were open to suggestions from other agencies. Senior care staff had recently received training in taking regular observations of indicators such as people's pulse, oxygen levels and blood pressure. This helped staff spot early signs of illness and give more informed reports when engaging with other healthcare professionals on behalf of people.

Working in partnership with others

- The provider was open and transparent when working with other agencies and healthcare professionals to deliver joined-up care for people. They had a good working relationship with the local authority and GP practice. People had a yearly review of their care with a GP or community nurse to check their care plans continued to meet their needs.