

Canterbury Care Homes Limited

Rowans Care Centre

Inspection report

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Ratings

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

Summary of findings

Overall summary

About the service: Rowans Care Centre is a 36 bedded care home providing nursing care. At the time of our inspection there were 25 people living in the care home, located in a residential area of Macclesfield. The premises provide purpose-built accommodation for 36 people in single bedrooms. It is a two-storey building and people live on both floors. Access between floors is via a passenger lift or the stairs.

People's experience of using this service:

People received good standards of care. The atmosphere at Rowans Care Centre was welcoming, friendly and sociable. The registered manager and staff had developed good relationships with people. Throughout the inspection staff were seen to provide sensitive and compassionate care.

Staff worked together as an effective team because they benefited from having shared aims and objectives. The registered manager was highly visible in the home providing guidance and leadership, so staff were clear about their roles and responsibilities and knew what was required to ensure the service provided good care to people. Everyone we spoke to during our inspection had something positive to say about the home and the standard of care provided.

People felt safe living at the home and had confidence in the management and staff teams. Risks to people's health safety and welfare were identified and plans were put in place to ensure risk of harm was minimised, so people were safe. Medicines were managed safely, and people received their medication at the right times. The environment was safe, and people had access to appropriate equipment where needed.

There was enough suitably qualified and skilled staff to meet people's individual needs. Staff told us that morale was good, they were very well supported and received a range of training opportunities appropriate to their role and people's needs. Staff appreciated the support and leadership provided by the registered manager. They had received guidance on the provision of person-centred care and equality and diversity. This produced a positive caring working environment where staff shared a clear vision and credible strategy to deliver high-quality person-centred care and support.

People were involved in every aspect of delivery of care. Their personal needs and preferences were reflected in care plans so staff knew how to meet their needs in a person-centred way. Staff had a good understanding of people's individual needs and preferences and worked effectively to ensure people's needs were met.

People received the right care and support to eat and drink well and their healthcare needs were understood and met. People who were able, consented to their care and support. Where people lacked the capacity to make their own decisions they were made in their best interest and in line with the Mental Capacity Act 2005.

Effective quality assurance process were in place.

Rating at last inspection: Requires improvement (report published 8 September 2018).

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our inspection programme. If any concerning information is received we may inspect sooner.

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

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 caring?

The service was caring.

Details are in our Effective findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our Effective findings below.

Good ●

Is the service well-led?

The service was well led

Details are in our Effective findings below.

Good ●

Rowans Care Centre

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

This inspection was conducted by one adult social care inspector.

The service had a manager registered with CQC. This means they and the provider are legally responsible for how the service is run and the quality and safety of the care provided.

Service and service type:

Rowans Care Centre is a care home. People in care homes receive accommodation and nursing or personal care. Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

Notice of inspection:

This inspection was unannounced.

What we did:

Our plan took in to account information the provider had sent to us since the last inspection. We considered information about incidents the provider must notify us about and looked at issues raised in complaints and how the service responded to them. We assessed information we require the provider to send to us at least annually within their provider information return (PIR); this provides key information about the service, what the service does well and the improvements they plan to make. We used all this information to plan our inspection.

During our inspection we spoke with nine people using the service and seven of their visiting relatives and friends to ask about their experience of care. We spent time making observations of the care provided and

the interactions from staff towards people. We spoke with the registered manager, regional manager, maintenance, activities coordinators, two domestic assistants, the chef, assistant chef four nurses, four care staff and two visiting care professionals. We also looked at four people's care records and a selection of other records including those related to the quality monitoring of the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

People were safe and protected from avoidable harm. Legal requirements were met.

Assessing risk, safety monitoring and management

- When we conducted our previous inspection in January and February 2018, we found the registered provider was in breach of regulations in relation to safe care and treatment and staffing. During this inspection we found the required improvements had been made and were well imbedded in the care practices of the home. This will help to ensure that the required improvements are sustained.
- The home had a relaxed, friendly and welcoming atmosphere.
- People who lived at the home were well presented and confident in demeanour. They took the initiative to engage with us and welcome us to their home. They spoke highly of the home and the standard of care provided. They told us that they were felt safe and were very well looked after.
- Personalised risk assessments were in place and regularly reviewed to help nursing and care staff safely manage any risks associated with people's care. Risk assessments addressed a range of possible hazards and identified measures and controls to ensure people were safe.
- Where appropriate specialist equipment was used to prevent accidents and reduce risk.
- People had been involved with the development of these risk assessments and had given their consent where safeguards had been suggested. A relative said: "the best thing about this home is the way everything is recorded and planned, risks are planned for and we are involved so we know they are safe".

Staffing and recruitment

- There was enough suitably trained and competent staff on duty to meet people's needs and to ensure their safety and wellbeing.
- We were impressed with the way the staff team worked together to ensure each person's needs were met.
- All the people spoken with praised the staff for their dedication and high standards of care they provided. One person said: "I'm always well treated, I never have to wait for anything, I feel safe and there is enough staff, they are very good to me".
- A dependency tool was used to ensure staffing levels were appropriate.
- Staff had been recruited safely.
- A reference received contradicted information on a staff member's application form. The registered manager acknowledged this should have been picked up and addressed prior to the person's employment. However, they sought clarification from the previous employer which confirmed the information given by the employee was accurate.

Systems and processes to safeguard people from the risk of abuse.

- People told us they felt safe living at Rowans Care Centre. One person said: "I feel very safe, oh yes they are marvellous, very friendly, very caring, makes me very happy. Yes, they treat me with respect, the place is very clean, and the laundry is excellent". Another said: "I feel safe and well looked after". A visiting relative said "I

have no doubt (relative) is safe". I know they have procedures about this but never had to use them."

- People were protected from abuse by staff who had received training, had access to relevant information and showed a good understanding of what was meant by abuse. Staff were confident in reporting safeguarding concerns.
- The provider had a "whistle-blowing" policy, but this did not mention the protections afforded whistle-blowers. We recommend that the home's whistleblowing policy is amended to include reference the legal protections are afforded "whistle-blowers".

Using medicines safely

- Medicines were administered, stored and managed safely by appropriately trained staff who had their competency to administer medication assessed on a regular basis.
- Staff sought consent before offering people their medication.
- Medicine administration records (MARs) were completed correctly and staff had access to information and guidance about how to safely administer people's prescribed medication, including, the use of medication to be given 'as required' (PRN).
- Medicines audits were carried out regularly to ensure people received their medicines as their doctor had prescribed them.

Preventing and controlling infection

- All areas of the home were seen to be clean and hygienic, and free from malodour although we observed debris from a person's electric shaver was still there the following day. The manager advised the matter would be addressed via supervision with care staff who had assisted with personal care the previous morning.
- Staff understood their responsibility in relation to infection control and were seen wearing personal protective equipment appropriately.
- Effective infection control audits had been undertaken.

Learning lessons when things go wrong

- Accidents and incident records were completed and reviewed regularly by the management team. Action was taken to identify emerging trends or patterns and to ensure risks were minimised, as far as possible.
- We spoke with the person who had been injured following an accident and they told us that the accident had been with their involvement and they had agreed what needed to be done to prevent a recurrence. This showed us that lessons were learned when things went wrong.
- Incident investigations included an analysis of the causes and exploration as to what could be done to prevent a recurrence. Where appropriate an action plan was implemented and monitored to ensure effective action was taken.
- Audits and any related action plans were reviewed by the regional manager on a monthly basis, to ensure any required improvements were on track.

Is the service effective?

Our findings

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

People's outcomes were consistently good, and people's feedback confirmed this.

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

- There were sufficient numbers of suitably trained and competent staff to meet the needs of the people and to ensure their wishes and personal preferences were met.
- There was a relaxed and welcoming atmosphere.
- People were well presented and smartly turned out and spoke highly of the standard of care provided.
- People told us their choices and personal preferences were respected and met. One person told us "I'm going for a rest now, I can get up and go to bed whenever I like, I'm free, no rules they (the staff) are very relaxed and accommodating".
- People's needs were assessed, reviewed and where necessary revised in accordance with best practice. The relatives of a person living with dementia told us how they had been involved in the assessment and care planning processes. They said "This is why we are so happy with the care provided. They give us confidence because they are ahead of the game, they risk assess and keep us informed, they involve us so we know (person's) needs are met in the best possible way."

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

- Staff were knowledgeable about each person's dietary requirements.
- Nutritional assessments, risk assessments and care plans were detailed with each person's individual needs and kept under review to ensure people's nutritional needs were met.
- Staff were aware of other nutritional risks, such as allergies and weight loss. Where appropriate specialist diets were catered for and outcomes were closely monitored.
- Staff supported people to eat their meals with sensitivity, care and skill. They gave people time to eat their meals and capitalised on opportunities for social interaction.
- People told us: "the food is lovely, lots of choice, can't remember what I have just had but it was lovely all the same" and "The food is good, and I like it here".
- People were offered a choice and alternative meals were available. People had access to snacks and drinks throughout the day.

Supporting people to live healthier lives, access healthcare services and support. Staff working with other agencies to provide consistent, effective, timely care.

- A visiting health care professional told us the manager and staff were professional in their approach but also welcoming and easy to get along with. They told us that staff worked collaboratively to find least restrictive solutions to meet people's needs in their best interests.
- Staff knew how to refer people to other healthcare services if they had concerns about a person.
- People had routine access to healthcare professionals and had been referred to specialists when required.

- Effective measures were in place to maintain people's skin integrity.
- Information regarding people's changing health needs was shared between staff during shift handovers, and people's care was adjusted as required.

Staff support: induction, training, skills and experience

- The staff worked together as a team with the benefit of having shared aims and objectives and a common goal to provide effective person-centred care.
- Staff received training and were competent, knowledgeable and skilled, carrying out their roles and responsibilities effectively. The registered manager took action to ensure staff undertook refresher training.
- Newly recruited staff had completed a comprehensive induction and continued to receive training throughout their employment to maintain up-to-date skills and knowledge.
- Staff felt supported in their role and were able to discuss work related issues and their learning and development needs with senior staff in regular supervision sessions. Nursing staff received effective clinical supervision from the registered manager and were confident they had the required skills to carry out their roles and responsibilities safely and effectively.

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

- The premises is a purpose-built care home. The design and layout met the physical needs of people living at the home.
- Technology and equipment was used effectively to meet people's care and support needs.

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 as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular 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. The application procedures for this in care homes and hospitals are 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 were being met.
- Where people lacked the capacity to make particular decisions, they were supported to make decisions in their best interests, enabling them to exercise choice and control over their lives and were supported by staff in the least restrictive way possible.
- Some staff were not clear as to when an MCA assessment was required, and we saw that an MCA assessment had been completed when there was no doubt as to the person's capacity to make the relevant decision. The manager took immediate action to address this misunderstanding once it was brought to their attention.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

During the previous inspection we found the registered provider was in breach of regulation in relation to staffing. During this inspection we found that improvements had been made and the registered provider was no longer in breach of this regulation

Ensuring people are well treated and supported; respecting equality and diversity. Respecting and promoting people's privacy, dignity and independence

- Staff provided compassionate care, treated people with dignity and respect and provided support in an individualised way.
- The atmosphere in the home was warm and welcoming and staff had developed good relationships with people. Staff were seen to be genuinely caring and kind when providing support.
- Everyone spoken with had something positive to say about the home, the staff and the standard of care provided. Comments included, "I'm very happy", "the staff are very good, kind and approachable", "marvellous they (the staff) are very friendly, very caring, makes me very happy. Yes they treat me with respect, the place is very clean and the laundry is excellent", and another person said, "Well it is very nice, true I'm treated with respect but most of all I feel like I belong here".
- Staff had a good understanding of each person's individual needs and personal preferences. They understood and supported people's communication needs and choices. They showed skill in their interactions with people.
- People were kept clean and well presented in clothes of their choosing.
- Staff knew how to respond to people when they were upset, unsure or needed reassurance. They provided support according to the person's needs and showed genuine care and understanding.
- Records relating to people's care were secure and confidential.

Supporting people to express their views and be involved in making decisions about their care.

- People were placed at the centre of decision making regarding their care and their daily lives.
- People, along with family members, were encouraged to share their views about the care provided with regular care plan reviews and meetings with the manager and staff.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

During the previous inspection we found the provider to be in breach of regulation in relation to person centred care. During this inspection we found that the required improvements had been made and the registered provider was no longer in breach of this regulation.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control.

- People were involved in all aspects of their care planning and where appropriate received support from relatives, community-based professionals and where required advocates.
- Care plans were person-centred, well written reflecting each person's physical, mental, emotional and social needs. Personal preferences were highlighted.
- Care plans were kept under review and were revised when a person's needs changed.
- A family member congratulated nursing and care staff on the standard of care provided and told us how staff had worked effectively and collaboratively through a series of review meetings to develop care plans that met their relative's needs.
- People were supported to make choices and staff listened and respected people's wishes. We saw care staff supporting people to make an informed choice using pictograms and photographs of meals served.
- People were supported to access a range of activities and entertainment, on a one to one basis or in groups, on a regular basis.
- The activities co-ordinator had positive relationships with people and knew them well. Activities were planned based around people's needs and preferences.

Improving care quality in response to complaints or concerns

- People and family members were given information about how to make a complaint or raise concerns. They were confident about making a complaint and felt listened to. One person gave an example where their relatives had raised a complaint and had received a rapid response from the manager.
- The service kept a record of any complaints that had been made; those recorded had been dealt with appropriately.

End of life care and support.

- People were at the centre of decision making regarding their care and treatment including end of life care and support. Where appropriate, people had received support to make decisions about their preferences for end of life care and were involved in developing care and treatment plans.
- Care plans included people's preferences, spiritual and cultural needs and advanced decisions about their end of life wishes and appropriate professionals were involved throughout.
- Visiting professionals and relatives spoke highly of the standard of care provided at the home describing it as compassionate and sensitive to people's individual needs. One visiting relative told us that their loved one, who had passed away, had always received sensitive and compassionate care throughout their stay at the home.

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.

During the previous inspection the registered provider was in breach of the regulation in relation to poor governance. During this inspection we found that improvements had been made and the registered provider was no longer in breach of this regulation

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

- Quality assurance systems were in place and used effectively to monitor key aspects of the service. Audits and checks were completed on a regular basis by the management team and registered provider to identify areas of improvement.
- Where areas of improvement were identified action plans were put in place and monitored by the registered manager and regional manager who carried out monthly audits to check required improvements were on track.
- Arrangements to send out questionnaires to seek people's views were in process.
- The atmosphere in the home at the start and throughout the course of our inspection was positive. Staff worked together as an effective team.
- The registered manager was highly visible in the home providing guidance and leadership, so staff were clear about their roles and responsibilities and knew what was required to ensure the service provided good care to people.
- People told us that the home was well managed and that they had confidence in the managers ability to address any issues. Comments included, " I like the manager she is approachable" and "we have confidence the manager, we told her that (relative) needs had changed, the manager listened to us and made changes".
- Staff told us they felt well supported by the registered manager and found them to be open and transparent and felt able to approach them if they had any concerns. Comments included " [manager] is very good manager, if I have a problem they always help and support me" and "(manager) is a good manager, very good clinically, there is a lot to learn from them. Clinical supervision is very good and regular at least one a month and our competency is assessed regularly including medication, this gives me confidence".
- The registered manager was aware of their legal requirement to notify CQC about certain events and submitted notifications when required.
- The provider publicised the home's previous CQC rating of requires improvement on their website with a link to the full CQC report and copies of the previous inspection report were posted on the home's notice board.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others.

- The service continued to involve people and family members in discussions about the quality of care

provided.

- There was a high number of visitors and relatives within the care home during the inspection. Visitors were welcomed and there were no restrictions for visitors creating a warm and inclusive environment.
- Staff felt involved in decisions made about the service; and were confident sharing their ideas and views and felt they were listened to.
- The service worked closely with other agencies and community groups to achieve good outcomes for people. Two visiting community-based care professionals were spoken with during the inspection. Both told us that managers and staff worked collaboratively in partnership with them, exploring and finding solutions to issues and problems so people received the best possible outcomes.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility.

- The managers and staff promoted a culture of person-centred care by engaging with everyone using the service and family members.
- People were involved in every aspect of care delivery, from assessment, through to care planning monitoring and review.
- Staff received training, coaching and guidance on the provision of person-centred care and equality and diversity producing a clear vision and credible strategy to deliver high-quality person-centred care and support.