

Voyage 1 Limited

Roselea

Inspection report

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Date of inspection visit: 21 July 2015 Date of publication: 16/09/2015

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	

Overall summary

We carried out a comprehensive inspection of Roselea on 15 January 2015. One breach of the legal requirements was found at the time of the inspection. This related to staff not receiving training to meet the needs of people effectively. After the inspection, the provider sent us a report of the actions they would take to meet the legal requirements.

We undertook a focussed inspection on 21 July 2015. This was to check if the provider had followed their plan and

to confirm if the legal requirement was now being met. We also looked at whether the service provided was effective and caring. This was because when we visited on 15 January 2015 these areas required improvement.

This report only covers our findings in relation to these specific areas. You can read the report from our last comprehensive inspection, by selecting the 'All reports' link for 'Roselea' on our website at www.cqc.org.uk.

Roselea is a care home registered to accommodate up to 12 people with a range of learning and physical disabilities. The accommodation includes self-contained

Summary of findings

flats on the top floor for people who are able to live more independently. One person had moved to another service since our last inspection. Ten people were using the service at the time of our inspection.

This inspection was unannounced.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At our focussed inspection on 21 July 2015, we found the provider had followed their plan and legal requirements had been met.

The provider had ensured ten staff had received additional training on caring for people with complex epilepsy. A clear plan was in place for the remaining 12 staff to undertake this training. Staff said they felt more confident in their ability to provide care and support to people. A health care professional told us they were more confident the staff could effectively meet people's needs.

The provider had also ensured staff received training on understanding and responding to people's anxieties and behaviours. Staff said they felt more confident in supporting people when anxious and distressed.

A system to ensure the service complied with the requirements of the Deprivation of Liberty Safeguards (DoLS) had been put in place. This meant people were protected from the risk of their freedom and liberty being deprived without the correct authorisations being in place.

People told us staff were caring. Additional arrangements to ensure people's confidentiality was protected had been put in place.

The ratings from our inspection on 15 January 2015 were prominently displayed in the lobby of the service.

As a result of this inspection we have been able to change the rating of the service.

Summary of findings

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 when we inspected in January 2015.	Good	
Is the service effective? We found action had been taken to improve the effectiveness of the service.	Good	
Staff received training to equip them to meet people's health needs.		
This meant the provider was now meeting legal requirements.		
The provider had introduced a system to ensure they complied with the requirements of the Deprivation of Liberty Safeguards (DoLS).		
We have revised the rating for this key question because people were receiving a service that was effective.		
Is the service caring? We found action had been taken to ensure people's confidentiality was protected.	Good	
People told us the staff were caring.		
We have revised the rating for this key question because people were receiving a service that was caring.		
Is the service responsive? The service was responsive when we inspected in January 2015.	Good	
Is the service well-led?	Good	
The service was well-led when we inspected in January 2015.		



Roselea

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. The inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008 and to provide a rating for the service under the Care Act 2014.

We undertook a focused inspection of Roselea on 21 July 2015. We checked that the improvements planned by the provider after our comprehensive inspection on 15 January 2015 had been made.

We inspected the service against two of the five questions we ask about services: is the service effective and is the service caring. This was because the breaches of regulations and areas the service was rated as requires improvement at the last inspection, were in relation to these questions.

The inspection was unannounced and undertaken by one inspector.

Before carrying out the inspection, we reviewed the information we held about the service. This included the report we received from the provider which set out the action they would take to meet legal requirements. We looked at the notifications and any information of concern we had received. Notifications are information about important events which the provider is required to tell us about by law.

During our inspection we spoke with two people who lived at the service and three staff members. We spoke with a senior manager and a manager from another service who had been asked by the provider to oversee the service as the registered manager was on leave. We also spoke by telephone with a health and social care professional involved with people using the service.

We looked at each person's care records, as well as records in relation to staff training.



Is the service safe?

Our findings

When we visited the service in January 2015, we found that the service was safe. We have not reviewed the rating we gave at that time. Comments we received from people who used the service and staff members did not give us cause to review this key question.

You can read what we wrote about this section in the comprehensive report by selecting the 'All reports' link for Roselea on our website at www.cqc.org.uk.



Is the service effective?

Our findings

At the inspection of Roselea on 15 January 2015 we found that people were at risk of receiving care from staff who had not received the necessary training to meet people's health needs.

This was a breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focussed inspection on 21 July 2015 we found the provider had taken the action they had planned to take in order to meet this regulation.

All staff had received basic training on epilepsy using the providers on line training system. Training records showed that ten of the 22 staff had received additional training in epilepsy. With the remaining 12 staff booked to do this training between September 2015 and November 2015. This was consistent with the provider's action plan. The health and social care professional working with the provider to meet the needs of people with epilepsy said they were pleased the provider had booked all of their staff on this training. They also said they had noticed an increased level of knowledge and ability of the staff in caring for people with epilepsy as a result. The area manager told us staff that had not completed this training had viewed a DVD identifying types of seizures and how they should be managed. A record of staff who had viewed the DVD was kept with training records.

Staff told us this training equipped them to meet the needs of people. One staff member said, "I've done the on line training, the in depth training and training on administering emergency medicines to someone experiencing recurring seizures. The training was really good and also underlined the importance of us keeping detailed records of seizures". Another staff member said, "The training was far more in depth and I now feel far more confident". A third staff member said, "I'm doing the in depth training in October. I did the initial on line training and it wasn't sufficient but I have done training on administering emergency medicines and viewed the DVD we were given. I have also talked through epilepsy with the manager at supervision and feel confident in supporting people with epilepsy".

At the inspection on 15 January 2015 staff gave mixed feedback on the training provided on understanding and responding to people's anxieties and behaviours. In January the registered manager explained this training was provided for staff to increase their understanding and to allow staff to remove themselves from potentially aggressive situations. Physical restraint was not routinely used in the service. In January 2015 we found not all staff had received this training. At our focussed inspection on 21 July 2015 records confirmed staff had received this training. Staff said they felt more confident in supporting people when anxious and distressed. One care worker said, "The training is good and we use staff meetings to refresh ourselves on how to support people".

We looked at whether the service was applying DoLS appropriately. These safeguards protect the rights of adults using services by ensuring that if there were restrictions on their freedom and liberty, these were assessed by professionals who were trained to assess whether the restriction was needed. At our inspection in January 2015 we found one person's DoLS authorisation had lapsed. We brought this to the attention of the registered manager and deputy manager at the time and they submitted a new application before we left the premises. We considered this to be an oversight and made a recommendation that the provider reviewed their systems for monitoring DoLS, to ensure people were not deprived of their liberty without authorisation. At our inspection on 21 July 2015 we found the provider had introduced a system to monitor the dates on which these authorisations lapsed. The area manager said, "We now have a reminder in our outlook calendars for each authorisation. This lets the registered manager and me know in advance when an authorisation will elapse so that we can review and if necessary submit a new application". We saw the relevant dates were on the electronic diary system. People's care records showed the provider had ensured DoLS applications had been submitted where required.



Is the service caring?

Our findings

At our inspection on 15 January 2015 we found people's confidentiality was not always respected. This was because during our inspection a staff meeting was held in a communal area, three people who used the service were sat in this area and confidential information regarding other people using the service was discussed. We brought this to the attention of the registered manager at the time. They agreed this had compromised people's right to confidentiality and we were told this would not happen at future meetings.

At our focussed inspection on 21 July 2015 staff said meetings were held in private wherever possible. They said however, that if people were present they now used a coding system. We were shown instructions for staff which detailed these codes. Staff told us the system was easy to use. They also said they only used this system when there was a risk that people's confidentiality would be compromised. They said that when this wasn't the case they always used people's names. We spoke to the area manager who said, "This has been clearly communicated at staff meetings and staff understand the service must be person centred, the coding system will only be used to ensure people's confidentiality is maintained. This meant the provider had put in place measures to ensure people's confidentiality was protected.

Throughout our visit on 21 July 2015 we observed staff interacting with people in a caring manner. People we were able to talk with told us staff were caring. Staff said they felt the service provided to people was caring.



Is the service responsive?

Our findings

When we visited the service in January 2015, we found that the service was responsive. We have not reviewed the rating we gave at that time. Comments we received from people who used the service and staff members did not give us cause to review this key question.

You can read what we wrote about this section in the comprehensive report by selecting the 'All reports' link for Roselea on our website at www.cqc.org.uk.



Is the service well-led?

Our findings

When we visited the service in January 2015, we found that the service was well-led. We have not reviewed the rating we gave at that time. Comments we received from people who used the service and staff members did not give us cause to review this key question.

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