

## Aitch Care Homes (London) Limited

# Rosebank Lodge

### Inspection report

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### Ratings

#### Overall rating for this service

Requires improvement



Is the service effective?

Requires improvement



### Overall summary

We carried out an unannounced comprehensive inspection of this service on 18 December 2015 and a breach of legal requirements was found. This was because the service did not provide support to staff in the form of one to one supervision sessions to consider their practice and professional development. The service also did not hold staff team meetings on a regular basis. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach.

We undertook a focused inspection on the 5 November 2015 to check that they had followed their action plan and to confirm that they now met legal requirements. This inspection was unannounced.

This report only covers our findings in relation to this requirement. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Rosebank Lodge on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rosebank Lodge is a care home that provides accommodation and personal care for up to 13 people

who have physical disabilities, some of whom also have learning disabilities. At the time of our visit there were 11 people living at Rosebank Lodge. The service provides a range of accommodation for people including studio type accommodation. Historically this has resulted in a range of people being admitted to the service. Some people are independent whilst others require one to one support.

The service had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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.

During our focused inspection we found that the provider had followed their action plan. We saw legal requirements had been met by the provider because they provided support to their workforce through regular team meetings and one to one supervision meetings. The

# Summary of findings

registered manager was new to the home and had not been in post at the time of the previous inspection. Staff told us the new registered manager was approachable regarding professional and personal issues.

# 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 effective?**

We found that appropriate action had been taken by the provider to ensure staff felt supported.

The provider had put procedures in place to make sure staff received regular one to one supervision sessions with their line manager, and there were regular team meetings so staff felt supported to undertake their roles with confidence.

This meant that the provider was now meeting legal requirements. We have been unable to revise the rating from 'requires improvement' to 'good' as we need to see evidence the provider is able to sustain this improvement over time.

**Requires improvement**



# Rosebank Lodge

## 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. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This unannounced focused inspection was undertaken by an inspector on 5 November 2015. This inspection was completed to check that improvements to meet legal

requirements planned by the provider after our comprehensive inspection in December 2015 had been made. We inspected the service against one of the five questions we ask about services: is the service effective?

Before our inspection we reviewed the information we held about the service, this included the provider's action plan, which set out the action they would take to meet legal requirements.

During our inspection we visited the home and looked at records relating to five members of staff, team meeting minutes and spoke to four members of staff on duty.

# Is the service effective?

## Our findings

At our comprehensive inspection of this service on 18 December 2014 we found the provider was in breach of a legal requirement because the service was not providing sufficient support to staff for them to undertake their roles and responsibilities. This meant that staffs professional development was not routinely being considered.

Although staff told us the previous manager was approachable. Our evidence was that staff team meetings were sporadic with only two being held in the previous year. This meant that communication between the staff team which covered areas relating to the whole service was limited and could have resulted in people receiving inconsistent care. In addition, one to one supervision sessions for care staff with their line manager were ad hoc. There was an example of one staff members' last supervision session being held six months previously, whilst other staff reported infrequent sessions with their line manager.

At this focused inspection we spoke with four members of staff, all of whom were positive about the new registered manager. Some comments we received included, "I feel supported. One step at a time I see progress and stability." Another person said, "He's [registered manager] is a good man, if I don't understand anything I go to him."

The registered manager had initiated team meetings which were held monthly. We saw minutes of these meetings and staff confirmed there was an expectation they attend. Staff

told us the monthly meetings were one of the primary ways of communication amongst the staff team and between the registered manager and care staff. One person told us, "Communication has improved greatly."

At this focused inspection we also looked at one to one meetings held between the registered manager and staff team. Staff confirmed they now had sessions which looked at professional development and practice issues. This helped to ensure people received care from staff that in turn were supported to undertake their roles and responsibilities appropriately. There was also an opportunity for staff to discuss any personal issues which may have impacted on their performance at work.

We saw the registered manager had initially met with everyone within the staff team. Subsequently, these one to one sessions were being delegated to the deputy manager and a senior member of staff. The providers' expectation was that these meetings would be held every two months. Whilst the service was not meeting this level of frequency, it was noted that one to one meetings were much more regular.

Staff told us the registered manager was available to them whenever they needed support. They went on to say the registered manager was approachable and they felt their views would be listened to and acted upon. A member of staff commented, "If you're not doing something right, he'll [registered manager] will have a word with you in a professional way, so you know how you can put it right."