

Autumn Days Care Limited

# Rosedale Retirement Home

## Inspection report

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## Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

**Inspected but not rated**

Is the service well-led?

**Inspected but not rated**

# Summary of findings

## Overall summary

### About the service

Rosedale Retirement Home is a residential care home providing personal care for up to 24 people aged 65 and over in one adapted building. At the time of the inspection nine people lived in the home.

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

The provider had sought an interim manager to support the home until the new registered manager began work. The interim manager had reviewed associated risks to people's health and wellbeing, and these were being managed. The interim manager supported and guided staff to follow best practice. Competency checks were being implemented to understand if staff were competent in their roles and to identify where they may require additional support and/or training.

The provider was working with the interim manager to put more efficient processes and systems in place to assure themselves staff had understood the training and were consistently following safe and best practice.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was Requires Improvement (published 02 May 2020)

### Why we inspected

We undertook this targeted inspection to check on concerns we had about people's safety and care needs being met. The overall rating for the service has not changed following this targeted inspection and remains Requires Improvement.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Rosedale Retirement Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### Follow up

We will meet with the provider following this report being published to discuss how they will make changes to ensure they improve their rating to at least good. We will work with the local authority to monitor progress. We will 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?**

We have not changed the rating of this key question as we have only looked at the areas we had specific concerns about.

Details are in our safe findings below

**Inspected but not rated**

### **Is the service well-led?**

We have not changed the rating of this key question as we have only looked at the areas we had specific concerns about.

Details are in our Well-Led findings below

**Inspected but not rated**

# Rosedale Retirement Home

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection due to concerns we had about people's safety and care needs being met.

#### Inspection team

The inspection team consisted of two Inspectors.

#### Service and service type

Rosedale Retirement Home 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 the Care Quality Commission, however they had not begun working for the provider at the time of our inspection. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. An interim manager was supporting the service until the registered manager began work.

#### Notice of inspection

This inspection was unannounced.

#### What we did before inspection

We sought feedback from the local authority and professionals who work with the service. We completed a telephone assessment with the provider to understand how they were managing during the covid-19 pandemic. We reviewed information we had received about the service since the last inspection. We took this into account when we inspected the service. We used all of this information to plan our inspection.

#### During the inspection

We spoke with three people who used the service about their experience of the care provided. We spoke with four members of staff including the interim manager and three care staff. We also spoke over the telephone with the provider who is the Nominated Individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We used the Short Observational

Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We reviewed a range of records related to people's care, this included three people's care records.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We continued to review a range of records relating to the service provision. We spoke with a fire officer from Hereford and Worcester Fire and Rescue.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as Requires Improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check on specific concerns about people's safety and care needs being met. We will assess all of the key question at the next comprehensive inspection of the service.

### Staffing

- External agencies had raised concerns that as the previous home manager had left in early May 2020, there was no manager overseeing people's care to ensure staff were supporting people in a safe way. They also raised concerns and our telephone assessment with the provider also identified, there may not always be sufficient staff to support people and complete ancillary tasks such as cooking, cleaning and laundry.
- The provider responded to these concerns by sourcing an interim manager to oversee the staff's provision of people's care, while the provider waited for the new registered manager to start their role.
- People we spoke with told us they felt safe and staff responded to their requests for assistance. One person said, "Staff check on me at night." While another person passed comment on a staff member who walked passed and said, "She really looks after me."
- Where staff supported people in communal areas, for example to mobilise, we saw this was done in a way which kept people safe.
- The interim manager told us they had spent time guiding staff, leading by example and supporting staff to follow best practice.
- The interim manager advised us they would be completing competency checks to understand if staff were safe in completing care tasks, or whether additional training was required. They also shared with us how they were looking to upskill staff by providing additional training, such as train the trainer.
- Care staff told us they felt there were sufficient staff to meet people's needs and complete cooking duties.
- Care staff told us they were also completing cleaning tasks, once their care shifts finished, on a temporary basis until the domestic staff had returned to work.
- The provider had sourced support from an external contractor to undertake the cleaning of the home. The provider told us that the external contractor had not always been consistently reliable and they would continue to address this.
- Following our inspection, the provider confirmed that their existing domestic staff team had now returned to work.
- The interim manager was actively recruiting for more care staff to increase the skill mix of staff working within the home.

### Assessing risk, safety monitoring and management

- We identified that a neighbouring boundary line had recently been made unsafe, without the provider or interim manager being made aware by the neighbour of their plans to remove a tree line. This posed a

potential risk to people's safety should people need to use the fire exits to the back of the home in the event of a fire. Following our inspection, the provider made the boundary line safe. The fire service were kept up to date with this aspect.

- External agencies had raised concerns that people's individual risks had not been assessed and their care and treatment was not in line with their current care needs.
- The interim manager had reviewed all people's associated risks, such as skin integrity, falls and safe eating and drinking. People's risk assessments showed up-to date information of people's care and support needs.
- Through these reviews, it had been identified that some people required additional support from external healthcare professionals, and we saw referrals had been made.
- One person was receiving an assessment from the Speech and Language Therapist (SaLT) to ensure they were eating and drinking the most suitable food to keep them safe from potential harm.
- One person told us how staff supported them to feel safe. We saw staff supported people in a way which promoted their safety.
- The interim manager was developing communication between staff shifts, such as daily handovers and improving record keeping around daily notes of people's care. They told us this would help to ensure staff were delivering care in line with people's current needs. However, it was recognised that these processes were being implemented and needed time to embed into staff's practice.

# 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.

At the last inspection this key question was rated as Requires Improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check on specific concerns we had about people's safety and care needs being met. We will assess all of the key question at the next comprehensive inspection of the service.

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

- Governance around staff performance was not always robust. For example, the provider supported their staff with online training and practical training and ensured staff kept up to date with this. However, they did not have a robust system to gain assurances staff had understood the training and followed best practice when supporting people to stay safe. The provider told us the interim manager was streamlining this process and this would be the registered manager's role going forward.
- Following the inspection the provider made us aware of a new system that had been implemented to aid the provider's overview of staff performance. We will test the effectiveness of this system at our next inspection.
- The interim manager told us they were beginning to undertake competency checks with staff and would share their findings with the provider and the registered manager once they began work.
- While staff understood their duties during their shift, such as care, cooking or cleaning tasks, staff did not hold responsibilities which considered the wider aspect of the service provision to promote accountability. The manager told us they were putting training in place to upskill staff, such as train the trainer to promote staff's responsibilities.
- The provider understood their responsibilities for reporting notifiable incidents to the CQC and/or other agencies.