

McLaren House Limited

Rowena Court

Inspection report

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West Bromwich
West Midlands
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Tel: 01215537374

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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

Rowena Court is registered to provide accommodation for persons who require nursing or personal care for up to six adults aged over 60 who experience a long term mental health condition. At the time of our inspection there were five people using the service.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and on going monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

There was a registered manager in post when we inspected the home. 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.

People were at ease around care staff that understood how to keep people safe and had received training. Staff understood people's individual circumstances. Staff understood who to report concerns to as well as the risks to people's health. Staff understood people's health needs and the risks to their health. Recruitment processes for staff included background checks. People accessed support from staff when needed. People's support with medicines was reviewed and checked to ensure people received their medicines in line with guidance for that person.

Staff were supported through training and supervision. Staff supporting people understood the importance of obtaining their consent. People are supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice. Staff supported people to maintain a healthy diet and encouraged to make healthy choices in the food they chose. People were also supported to attend appointments with healthcare professionals and could seek additional help if needed.

People knew and liked the staff supporting them and had known them for some time. Staff understood people's individual care needs, preferences and understood people's cultural backgrounds. Staff involved people in their care by explaining choices and supporting people to make decisions about their care. People were supported by staff who understood what it meant to support people with dignity and respect.

Staff understood people's needs and how to support them. People's that were new to the home were supported so that staff could gradually get to know them and provide the support they needed. People understood they could speak with staff and the registered manager about their care if they had any concerns.

People knew and liked the registered manager. Staff spoke positively about working at the home and felt

part of a team that was well supported. Staff felt able to seek help and guidance if they required it. Regular reviews of people's care and quality audits ensured people's care planning was timely and up to date. The registered manager worked with other stakeholders to ensure people received the care they needed.

Further information is in the detailed findings below

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 ●

People felt safe sound staff they knew and who understood how to keep them safe. Staff understood people's health needs and the risks to their health. People received support when needed and recruitment processes included background checks. Staff understood the importance of minimising the spread of infection. The registered manager shared learning about people's care with staff.

Is the service effective?

Good ●

The service remains Good

Is the service caring?

Good ●

The service remains Good

Is the service responsive?

Good ●

The service remains Good

Is the service well-led?

Good ●

The service remains Good

Rowena Court

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 was planned to check 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 inspection took place on 9 January 2018 and was unannounced.

There was one Inspector in the inspection team.

As part of the inspection we reviewed the information we held about the service and looked at the notifications they had sent us. A notification is information about important events which the provider is required to send us by law. We requested information about the home from the local authority. The local authority has responsibility for funding people who used the service and monitoring its safety and quality.

We used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During our inspection we spent time with people in the communal areas of the home and saw how staff supported the people they cared for. We spoke with three people who lived at the home. We also spoke with three care staff, the registered manager, the deputy manager and a social worker.

We checked three people's care records. We also checked staff recruitment and training records. We also looked at information which showed us how the provider and registered manager monitored the quality of the care provided and the actions they took to develop the service further. This included questionnaires, minutes of meetings with people living at the home and minutes of staff meetings.

Is the service safe?

Our findings

At our last inspection in December 2015, we rated the service for this question as Requires Improvement because concerns were raised about how medicines were stored at the home. At this inspection we found systems for storing people's medicines had improved.

People we spoke with told us they felt safe at the home and that staff were kind and caring. We saw people were relaxed and at ease around staff who they knew well. Two people living at the home told us they had lived at the home for some time and knew the staff well and felt safe around them.

Staff we spoke with understood how to keep people safe and understood each person's background and how each individual person needed to be kept safe. Staff understood the process for reporting concerns and confirmed they had received training. The registered manager explained they had good links with the local authority and felt able to contact them and share any concerns they had.

The registered manager explained there had been some changes in staffing as some staff had left to pursue further education. The registered manager explained staff had been retained to work as bank staff and this helped to reduce any reliance on agency staff whilst maintaining continuity for the people living at the home. The registered manager explained the process for recruitment was ongoing but was confident staffing was appropriate. We saw people received support when needed and two people we spoke with told us they received support when required. We also reviewed two staff files and checked the registered provider's recruitment processes. We saw background checks were included as part of the recruitment process and references were followed up.

We reviewed three care plans and saw people had detailed risks assessments in place for the risks that were specific to them. For example, risk assessments took into consideration people's medical histories and backgrounds. Two staff we spoke explained to us the risks people lived with and how they supported people to minimise the known risks to their health.

People told us they received support with the medicines and we saw people received their medicines as prescribed. People's medicines were checked regularly by the deputy manager to ensure they received the support they needed. We saw also the registered manager had a process in place for checking medicines they received from the pharmacy and ensuring they were stored at the correctly.

Staff could explain to us how they ensured the spread of infection as kept to a minimum. Staff explained how they undertook regular checks of the home and used protective clothing such as gloves and aprons where appropriate. We also saw the home the kept tidy and people living at the home undertook some tasks to maintain the cleanliness if they chose. The registered manager explained communication at the home was good and that communication was usually via face to face contact with staff because it was a small team. The registered manager explained people's care was reviewed regularly and if there was learning for the team, this was shared with staff. For example, during our inspection, we saw the registered and deputy manager discuss a person's care needs and how support to the person could be improved.

Is the service effective?

Our findings

At our last inspection in December 2015, we rated the service for this question as Good. At this inspection, we found it continued to be Good with people receiving care, which was effective.

Staff we spoke with told us how they ensured people received the correct support. Staff told us people's care was regularly reviewed with stakeholders including hospital specialists in order to understand people's care and ensure people received the most appropriate care for their needs. The registered manager also explained how people's behaviour was monitored to ensure if their needs changed, guidance was obtained in order to best support people's care.

Staff we spoke with told us they were able to access training and supervision. Two staff we spoke with told us the registered manager had encouraged staff to develop their knowledge and confidence and so had gained management qualifications. They told us access to supervision was regular and that if they required direction or clarification they could speak with the registered manager.

People told us they liked the food at the home and that they were offered choices in the food and drinks they received. We saw throughout the inspection, people were included in discussions and people were encouraged to make choices. We saw where people's weight was of a concern, people were supported to make healthy choices in the food they chose.

People told us they saw and accessed the support they needed if they were unwell. One person told us if they ever needed to see the doctor, staff arranged for them to see them. The communication book we reviewed illustrated how staff had arranged for people to see doctor if they were concerned for their wellbeing and shared with other staff their concerns. Three care plans we reviewed detailed appointments people were supported to attend such as hospital specialists, dentists and opticians.

People told us they were encouraged to arrange their bedroom as they pleased and arrange their mementoes. We saw staff speak with one person about moving to the home and bringing in things that were important to them.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

Staff supporting people understood the importance of obtaining a person's consent. We saw staff supporting people understood whether people were able to make decisions for themselves. If people were not able to make decisions for themselves, staff understood the level of support they required. The deputy manager showed us how they monitored applications to deprive someone of their liberty and ensured all paperwork was in order and up to date.

Is the service caring?

Our findings

At our last inspection in December 2015, we rated the service for this question as Good. At this inspection, we found it continued to be Good with people receiving care, which was caring.

People told us they liked the staff. We saw people engage in chatter with staff. People we spoke with told us they liked and valued staff supporting them.

Staff we spoke with told us they had worked at the home for a number of years and knew people living there well. They told us as a small service they worked closely with people and got to know them gradually and were familiar with people's needs. Two staff we spoke with understood people's background and understood the language and food the person had grown up with. They explained to us how they tried to support the person to ensure the person was happy with their care.

We saw people were encouraged to make day to day decisions about their care. We saw people were supported to attend activities they chose to attend. People told us they could spend time within the home wherever they chose to. One person told us they liked to sit in the communal areas whereas another person told us they preferred their own quiet company. This was respected by staff.

We saw people were encouraged to maintain independence for things they wanted to retain responsibility for. We saw one person ask for help with personal care. We saw staff respond in a sensitive and discreet manner. Staff understood people's needs and how they required support. For example, one person preferred their privacy and staff understood and respected this.

Staff we spoke with understood what it meant to support someone with dignity and respect. They told us they had received training. One staff member told us they felt like they were more like friends with the people they supported. Staff we spoke with were aware of the importance of confidentiality regarding people's information. Records were stored appropriately in order to protect people's confidentiality.

Is the service responsive?

Our findings

At our last inspection in December 2015, we rated the service for this question as Good. At this inspection, we found it continued to be Good, with people receiving care, which was responsive.

During the inspection we saw how people were supported to move to the home. We saw two people that had either joined the home on a 'Taster' session or had newly moved to the home. Both people we spoke with appeared positive. One social worker we spoke with also spoke warmly about the home and how the staff were supporting people to move to the home. We saw staff regularly monitored how people were getting on and checked with them and in order that they could record their needs. We saw the deputy manager and registered manager discuss additional equipment needed for one person and arrange for the equipment to be ordered.

People told us they had regular meetings to discuss their care and check they were happy with their care. We saw from people's care records that people's behaviour was monitored for their own wellbeing and changes were recorded. Any changes needed to people's medications or care to reduce people's anxieties was implemented. We read from the communication book shared with staff how changes to people's care was implemented to ensure people received the most appropriate care.

People told us they could speak to any of the team supporting them about their care and any concerns they had. We saw the registered manager had a system in place for acknowledging and responding to complaints if needed. We saw there were no complaints.

The registered manager had begun the process of updating people's care to consider their wishes in terms of end of life planning. The registered manager explained where people had families, they were also included in the discussions.

Is the service well-led?

Our findings

At our last inspection in December 2015, we rated the service for this question as Good. At this inspection, we found it continued to be Good with people receiving care, which was well led.

During the inspection we spoke with the registered manager. 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. We saw people stop and chat to the registered manager throughout the inspection and appeared pleased to see her.

All staff we spoke with spoke positively about working at the home and with the registered manager. Two staff and the deputy manager all stated how they found the registered manager encouraging and had supported them to develop their careers even if this took away from the home. Staff told us communication was very good because the registered manager took an active role in people's care and therefore understood their needs.

People told us the registered manager spoke with them about their care. We saw people were invited to participate in meetings about care at the home and people told us they spoke with staff as well if needed. We reviewed residents meetings and saw people were invited to feedback what they thought of the home and any suggestions they may have. One person had fed back about the type of takeaway they would prefer and the change had been implemented.

The deputy manager explained how they worked with the registered manager to ensure people's care was up to date and reflected the person's needs. The registered manager showed us how they reviewed and updated people's care plans. They showed us how regular checks were made of people's care needs. People's care plans, medicines, risks assessments, bedrooms and personal needs were reviewed to ensure people received the correct support.

The registered manager explained how they had worked with the local authority to identify training opportunities and had volunteered to participate in a pilot project aimed at improving people's care. We saw during the inspection the deputy manager speak with a number of local agencies about people's care. The deputy manager spoke knowledgeably about people's care and explained how they spoke to stakeholders if they needed further guidance. A social worker we spoke with during the inspection spoke positively about the home and working with the home.