

Royal Court Care Limited

Royal Court

Inspection report

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Ratings

Overall rating for this service

Good



Is the service effective?

Requires improvement



Is the service responsive?

Good



Overall summary

We carried out an unannounced comprehensive inspection of this service on 8 and 9 January 2015 at which a breach of legal requirements was found. This was because the registered person did not have suitable arrangements in place in order to ensure staff were appropriately supported in relation to their responsibilities, by receiving appropriate supervision and appraisal. After this inspection we also received concerns in relation to how the provider dealt with complaints. We looked into these concerns as part of this inspection. This report only covers our findings in relation to these topics.

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 30 July 2015 to check that they had followed their plan and to confirm that they now met legal requirements.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection by selecting the 'all reports' link for 'Royal Court' on our website at www.cqc.org.uk.

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 focused inspection on 30 July 2015 we found the provider had followed their action plan which they said would be completed by 31 May 2015 and legal requirements had been met. Staff were having one to one meetings and annual appraisals to discuss their performance and training needs. People's complaints and those made on their behalf were listened to and investigated. A response was made to complainants to inform them about any action taken.

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 action had been taken to make the service effective.

This meant the provider was now meeting legal requirements. While improvements had been made we have not revised the rating for this key question. To improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for effective at the next comprehensive inspection.

Requires improvement



Is the service responsive?

The service was responsive. People's complaints and those made on their behalf were listened to and responded to appropriately.

Good



Royal 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.

We undertook a focused inspection of Royal Court on 30 July 2015. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 8 and 9 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 responsive? This is

because the service was not meeting legal requirements in relation to one question and concerns had been raised about the other. The inspection was undertaken by one inspector and was unannounced.

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 and other evidence submitted by the provider. We also looked at the concerns which had been raised and spoke with other people dealing with these issues.

During the visit we spoke with the registered manager and five staff. We looked at six staff records and schedules for annual appraisals and one to one conversations with staff. We also looked at complaints records.

Is the service effective?

Our findings

At our comprehensive inspection of Royal Court on 8 and 9 January 2015 we found the registered person did not have suitable arrangements in place in order to ensure staff were appropriately supported in relation to their responsibilities, by receiving appropriate supervision and appraisal. This was a breach of Regulation 23 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. This corresponds to Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

People benefitted from staff who had received one to one conversations with their line manager to discuss their responsibilities and training needs. Staff confirmed they had at least two if not three meetings during 2015. Records of these meetings were seen on their personal files. The

registered manager had also developed a spread sheet confirming when individual meetings had taken place with staff. These were scheduled to take place every three months. This spread sheet also evidenced when staff had their annual appraisal. For most staff this had taken place during June 2015 where they had the opportunity to discuss their performance, professional development and to monitor any training they had completed. In addition to their one to one meetings, staff confirmed they had been observed carrying out their tasks by their line manager in relation to their care practice or the administration of medicines. The registered manager said this “basic care monitoring” process helped line managers to build up a picture of staff competency for discussion at their one to one meetings. These also provided the opportunity to support staff to develop in their role or to provide refresher training if performance issues were identified.

Is the service responsive?

Our findings

Concerns were raised which indicated the provider was not responding to the complaints made by a relative. Copies of complaints were kept. The registered manager said the complaints they had received came from one source.

Records of these confirmed the investigations carried out, any action taken as a result and the provider's response to the complainant. She said face to face meetings had been held in addition to feedback by email and letter. A request to the provider by the local government's ombudsman had been responded to, providing all information they had requested. The complaint was not upheld but the provider was advised to carry out a mental capacity assessment for

the person living in the home at the centre of the complaints. This had just been carried out by a social worker and the registered manager said they were awaiting the result. A meeting had also been scheduled to meet with the complainant and an independent mediator.

The individual issues raised by the complainant were discussed with the registered manager and three staff. They confirmed a review of the person's needs was due to be carried out with people involved in their care. This would be arranged after the mediation meeting.

People's complaints and those of their relatives were listened to and responded to appropriately.