

Rosewood & Brook House Ltd

# Rosewood Lodge & Brook House

## Inspection report

11-13 Friarn Street  
Rosewood  
Bridgwater  
Somerset  
TA6 3LH

Tel: 01278457676

Date of inspection visit:  
10 January 2019

Date of publication:  
18 February 2019

## 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

Rosewood Lodge and Brook House provides care and accommodation for up to 20 people with mental health needs. At the time of our inspection, 19 people were living at the home.

At our last inspection we rated the service as overall good, with the key question of is the service caring rated as require improvement. At this inspection we found the evidence continued to support the rating of good and the rating for caring had also improved to good. There was no evidence or information from our inspection and ongoing 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.

Why the service is rated Good.

The service was safe. There were sufficient numbers of staff to support people safely and meet their needs. People received support with their prescribed medicines according to their needs. There were risk assessments in place to ensure people were supported in a safe way.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. Staff received good training and support to carry out their roles effectively. People were supported nutritionally and encouraged to eat healthily.

People were supported by staff who were kind and caring. Work had been done since our last inspection to improve the condition of the bathrooms. People were able to maintain contact with their families and loved ones.

The service was responsive to people's individual needs and preferences. People had the opportunity to take part in activities both organised by staff and those taking place in the community.

The service was well led. There was a registered manager in place supported by four team leaders and five seniors. Staff all reported feeling well supported in their roles and that the service was a good place to work.

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 ●

The service remains Good.

### Is the service effective?

Good ●

The service remains Good.

### Is the service caring?

Good ●

The service improved to Good.

### Is the service responsive?

Good ●

The service remains Good.

### Is the service well-led?

Good ●

The service remains Good.

# Rosewood Lodge & Brook House

## **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 10 January 2019 and was unannounced.

The inspection was undertaken by one Inspector. Prior to the inspection we reviewed all information available to us including the Provider Information Return (PIR). The PIR is a form completed by the provider to give us important information about the service and any improvements they plan to make. We also reviewed notifications. Notifications are information about specific events the provider is required to tell us about by law.

We spoke with three people using the service. We gave opportunity for others to speak with us but they declined. We spoke with three members of staff and the registered manager. We reviewed care plans for three people and looked at other documentation relating to the running of the home such as recruitment records and quality and safety monitoring.

## Is the service safe?

### Our findings

The service was safe. People told us they felt safe, one person for example said they had some mobility concerns but felt safe living in ground floor accommodation so they didn't need to use the stairs. Staff told us how they encouraged people to let them know where they were going and what time they'd be back, so that they could take action if necessary if the person didn't come back.

There were sufficient numbers of staff to ensure people's safety and meet their needs. The staff team was stable, providing continuity of care for people using the service. Staff told us that staffing levels worked well and they were able to give people the support they needed. Recruitment was safe. References and Disclosure and Barring Service (DBS) checks were carried out. We did note that the latest application form template did not prompt the applicant to give dates of previous employment. This is necessary so that any gaps can be explored. The registered manager told us they would rectify this immediately and it had been included in previous templates.

People received support with their medicines. Staff supported most people to ensure they took their medicines at the right times. However, as part of their support plan, some people did take on the responsibility of coming to the office to ask for their medicines at the times they were prescribed. Administration was recorded on Medicine Administration Records (MARS). We viewed a sample of these and saw they were completed accurately. Stock checks were carried out to check that medicine levels were as expected. This gave opportunity to identify and investigate any discrepancies.

Risk assessments were in place to provide guidance on the best ways to support people safely. These included risk assessments around people's mental health and the signs that staff needed to be aware of, that a person's health may be deteriorating. Risks in relation to nutrition were assessed, using a nationally recognised tool.

Incident and accident forms were completed when necessary. These gave details of the incident that had occurred and any follow up action that was necessary. This gave the opportunity for the registered manager to monitor for any trends in the kind of incidents that were occurring.

Staff understood their responsibility to safeguard people from abuse. They received training in this and refreshed their knowledge regularly. Staff told us they felt confident and able to report any concerns they had.

There were systems in place for keeping people safe in the event of fire. People had personal evacuation plans in place. Fire safety equipment was checked regularly and fire drills took place annually.

## Is the service effective?

### Our findings

The service was effective. Staff received good training and support to enable them to carry out their roles well. New staff to the service worked to complete the Care Certificate. This is a qualification that represented the basic standards required of staff working in the care sector. Training supplied to all staff included, equality and diversity, first aid, Mental Capacity Act and safeguarding. Staff had supervision with their line manager at approximately 3 monthly intervals but also told us they were able to raise any issues or concerns in between these more formal meetings. Staff had an annual appraisal where their performance and development needs were discussed.

People received support with their health appointments in accordance with their needs. People told us that staff accompanied them to appointments and helped arrange them when necessary. It was clear that staff were proactive in seeking professional advice when necessary. The registered manager spoke knowledgeably about people's mental and physical health and told us about examples of when specific action had been taken. For example, staff were concerned about one person and the amount of a certain drink they were consuming. It was clear that this had been followed up with relevant professionals.

There was detailed information in place about people's mental and physical health and what support they required. From speaking with staff it was clear they knew people well and understood the signs that someone's mental health was deteriorating.

People were provided with at least one cooked meal per day and for breakfast and supper, a selection of foods were on offer. People were asked about their meal choices each day and if there wasn't anything on offer that they liked, they had the option to be given money to purchase something from the local shops. One person was being supported to achieve a healthy weight and from viewing their care records, it was evident that they were working well towards achieving this.

Staff were aware of the principles of the Mental Capacity Act 2005. Staff were aware that people were able to make decisions about their day to day lives, and that apparent unwise choices did not indicate a lack of capacity. We saw that people were free to go out as they wished. Nobody using the service had a Deprivation of Liberty Safeguards (DoLS) authorisation in place.

## Is the service caring?

### Our findings

The service was caring. There were positive relationships between staff and the people they supported. People told us they got on well with staff and that staff treated them well. We saw that staff were respectful in their interactions with people and spoke in a pleasant tone.

At our last inspection we found that the location and condition of the bath and shower rooms didn't always promote people's dignity. This was due to not everyone having access to a shower on their floor of the building. At this inspection we found work had taken place to improve the condition of the bathrooms. The registered manager told us that no one had complained about not having easy access to a shower. They said they would put a shower in one of the bathrooms if this ever became a concern.

People were encouraged to be independent and to take responsibility for their own accommodation and wellbeing. Staff respected that individual flats were people's own private space but offered support and encouragement to keep it clean and tidy.

People maintained contact with their families and loved ones. One person told us how they liked to go to a nearby town to visit family. Families were contacted about and included in people's care when people wanted them to be.

## Is the service responsive?

### Our findings

The service was responsive to people's needs. Staff were knowledgeable about people's needs and preferences and supported them to lead the lives they chose to. One person told us, "It's ok, I like it here".

People had a keyworker. A keyworker is a member of staff with particular responsibility for the person they were allocated to. People knew who their keyworker was and told us they felt able to speak with their keyworker if they had any concerns or problems. Staff told us they were able to spend time with the people they were keyworker for and support them with tasks such as tidying and cleaning their rooms.

There was a member of staff with responsibility for organising activities. They told us that some people did not wish to engage but there was a core group of people who enjoyed taking part. One person showed us the art and craft activity they had recently completed. The member of staff also told us they had organised a fishing trip which had been thoroughly enjoyed by the people who went. On the morning of our visit, people were taking part in a breakfast club activity where people helped prepare their own breakfast. One person we spoke with told us they talked about any activities they wanted to do at house meetings. People were also independent in going out of the home and able to access community based activities if they wished.

People's support plans were clear, person centred and reviewed regularly. This helped to ensure they were current and reflected any changes in people's needs. It was recorded that people had been included in the process and they had opportunity to provide their views and input on the kind of support they wanted. People also had opportunity to give their views about the service through service user meetings.

There was a procedure in place for responding to complaints. However there had been no formal complaints in the last 12 months. People told us they would feel able to raise any concerns and would usually speak with their keyworker in the first instance.



## Is the service well-led?

### Our findings

The service was well-led. There was a registered manager in place supported by team leaders and senior staff. The registered manager was a mental health nurse. They told us they had completed an additional course in psychology and kept up to date with developments in the field through reading. They also spoke with other managers in the organisation to discuss any concerns and seek support when required.

Staff reported feeling well supported in their work and that the staff team worked well together. The registered manager told us they would on occasion carry out shifts directly supporting people. This helped ensure they got to know people using the service very well and they understood their needs. It was clear from speaking with the registered manager they had in-depth knowledge of people living in the home. Staff meetings took place, though these tended to be in teams rather than as a whole staff team. We saw throughout the inspection that staff and service approached the registered manager to discuss any issues as they arose.

There was opportunity for people using the service to be involved in decisions about the running of the service. For example, the registered manager told us that people using the service were involved in interviewing potential new staff members and providing feedback about them. House meetings also took place, and these were an opportunity for people to raise any issues or concerns. People could also make suggestions for example about trips they wanted to go on.

The registered manager was aware of the responsibilities of their role. We saw for example that notifications were made to the Care Quality Commission as required by law.

There were systems in place to monitor the quality and safety of the service provided. This included having an action plan in place to monitor the service and identify areas for improvement. The registered manager told us they had ideas for how the service could develop in the future. These ideas were at an early stage but demonstrated a commitment to seeking continual improvement. The ideas that the registered manager was looking in to would provide excellent mental health support in the community. The registered manager was in contact with local community professionals to discuss and progress these plans.