

Rosemount Trust

Rosemount Home

Inspection report

79 Medomsley Road
Consett
County Durham
DH8 5HN

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Rosemount Home is a residential care home providing personal care to up to 16 people. The service provides support to older people, some of whom are living with a dementia. At the time of our inspection there were 14 people using the service.

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

Since the last inspection the provider had made improvements to the way laundry was managed and equipment was stored, which meant people were protected from the risk of cross contamination. Improvements to the building included a new laundry area, a new food storage area and a new boiler.

People told us they felt safe living at the home. Staff were aware of the safeguarding protocols and knew what action to take to keep people safe. Risks to people were identified and detailed assessments were in place, to ensure risks were managed safely. Medicines were managed safely. The premises were clean and there were good infection control practices in place.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The registered manager had effective oversight of the service. Quality checks were effective in identifying and generating improvements to ensure the safety and quality of the care people received. Staff were valued and felt supported in their work. People and relatives said they would recommend the service to others. Staff worked effectively alongside other health and social care professionals to ensure people's needs were met and their health maintained.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was requires improvement (published 14 April 2022).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

For those key questions not inspected, we used the ratings awarded at the last comprehensive inspection (report published 13 February 2020) to calculate the overall rating.

The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Rosemount Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Rosemount Home

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

One inspector carried out this inspection.

Service and service type

Rosemount Home is a 'care home.' People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Rosemount Home is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection

During the inspection we spoke with 6 people who used the service about their experience of the care provided. We spoke with 6 members of staff including the registered manager, deputy manager, 1 senior and 3 care assistants. We also spoke with the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included 3 people's care records and 6 people's medicines records. We looked at 2 staff files in relation to recruitment. A variety of records relating to the management of the service were reviewed.

After the inspection

We contacted relatives via email and telephone and received feedback from 5 of them.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection we recommended that the registered manager adopted a risk assessment to ensure the safe storage of moving and handling equipment and laundry use was in place. During this inspection we found the provider had made improvements.

- Since the last inspection the provider had made improvements to the way laundry was managed and equipment was stored, which meant people were protected from the risk of cross contamination. Improvements to the building included a new laundry area (which was clean and well-organised), a new food storage area next to the kitchen, and a new boiler.
- Risks to people's safety and welfare were identified and managed. Staff knew people well and were aware of people's risks and how to keep them safe. People's care plans included risk assessments about individual care needs.
- Fire drills were undertaken regularly. Each person had a personal emergency evacuation plan (PEEP) which contained details about their individual needs.
- Regular planned and preventative maintenance checks were up to date.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

- There were no restrictions on visiting at the time of our inspection, which complied with current government guidance.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Staff received safeguarding training and knew how to recognise and report any concerns.
- People and relatives felt the service was safe and they were happy with the care provided. One person said, "I'm looked after and feel safe." A relative commented, "I have no concerns about [family member's] safety at all. Staff know the residents very well."
- The provider had systems in place to protect people from harm. The registered manager understood their responsibilities and any concerns were acted on appropriately.

Staffing and recruitment

- There were enough staff to meet people's needs promptly. Staff supported people in a calm and professional way. Staff spent time engaging with people in a meaningful way.
- Safe recruitment procedures were followed. Appropriate pre-employment checks were carried out which included a Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Medicines were managed safely. People's medicines records contained enough information to ensure staff supported them with the correct medicines, at the correct times.
- Staff were trained in how to administer medicines safely. Their competence to administer medicines was kept under regular review to ensure their skills and knowledge remained up to date.
- People received their medicines as prescribed. Staff were patient and respectful when they supported people to take their medicines.

Learning lessons when things go wrong

- The registered manager promoted a culture of learning. Accidents and incidents were monitored and analysed to aid learning and improve care. This included looking at actions to reduce the risk of recurrence.
- Information was shared and discussed in staff meetings to support learning and promote good practice.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and, if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

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; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The service was well-led. There was a positive culture and ethos at the service which was driven by the registered manager. The registered manager led by example and actively promoted responsive care which improved people's quality of life. Staff ensured people received person-centred care.
- People and relatives spoke positively about the care provided. One person told us, "The staff are lovely here, very caring." A relative said, "Staff are wonderful with the residents and their families. I know [family member] is content here. You can ask the staff anything at all." Another relative said, "It's like a big family."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager understood their legal responsibility to be open and honest when something goes wrong. They submitted notifications to CQC for significant events that had occurred at the service, such as accidents and incidents.

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

- Quality assurance systems were effective in identifying and generating improvements within the service.
- The registered manager and staff understood their roles and responsibilities. When an incident occurred, this was investigated thoroughly, and lessons were learnt where appropriate.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and relatives were supported to provide feedback about the service. Suggestions were followed up and changes were made in response to feedback.
- Staff meetings were held regularly. Staff told us they were well supported and had plenty of opportunities to provide feedback about the service.

Working in partnership with others

- The management team and staff had effective working relationships with other organisations and professionals to ensure people received the right support.