



ENTER & VIEW

Rowan Court Care Home

Follow up visit

Part of the Healthwatch Staffordshire remit is to carry out Enter and View Visits. Healthwatch Staffordshire Authorised Representatives will carry out these visits to health and social care premises to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows Authorised Representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation – so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand. Healthwatch Staffordshire Enter and View visits are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit, they are reported in accordance with Healthwatch Staffordshire safeguarding policy, the service manager will be informed and the visit will end. The Local Authority Safeguarding Team will also be informed.

Provider Details

Name: Rowan Court Care Home

Address: Silverdale Road, Newcastle under Lyme,
Staffordshire, ST5 2TA

Service Type: Nursing Home

Date of Visit: 14th July 2017

Authorised Representatives

Name: Sandy Turner

Role: Author - Observer

Name: Glenys Robinson

Role: Observer

Purpose of Visit

Healthwatch Staffordshire visited Rowan Court in November 2016 where our representatives felt that a follow up visit should be made to see if improvements had been made. They had previously found that individual risks were being poorly managed, that there did not seem to be sufficient staff on the residential unit, that dignity was being compromised and that care and support not always provided when needed.

CQC had visited Rowan Court in October 2016 and their published report in March 2017 rated the home as inadequate. The home was placed in special measures. A further CQC inspection in May 2017 rated the home as requires improvement in all areas. This meant that the home was taken out of special measures as some improvements had been made, but there were still many areas where further improvements needed to be made.

The service was not consistently safe.

Risks of harm to people were not always assessed, minimised and managed safely.

People were not always safeguarded from abuse

The principles of The MCA 2005 were not always being followed to ensure that people were being safeguarded from unlawful restrictions.

People did not always receive health care and advice in a timely manner.

The service was not consistently caring.

People's right to privacy was not always upheld.

The service was not consistently caring.

The service was not consistently well led.

The systems the provider had in place to monitor and improve the quality of service had not been fully effective in making the necessary improvements.

Our Findings

Number of Residents

The home has a capacity of 76, but at the time of our visit there were 50 residents. Since being taken out of special measures in May 2017, the home can now accept 1 new resident every two weeks.

Staffing levels - Previous serious issues with under staffing putting both residents and staff at risk

This has been addressed and below are the present staffing levels

Memory unit -

Day - 1 Senior and 3 Care staff Night - 1 Senior 1 Care staff

Residential unit -

Day - 1 Senior and 2 Care staff Night - 1 Senior and 1 Care staff

Nursing unit - 26 out of 28 beds occupied at present

Day - 1 Nurse, 1 Advanced Care and 6 Care staff Night - 1 Nurse and 3 Care staff

Agency usage

We were advised that agencies are only used occasionally

We asked a series of questions relating to issues noted previously in our reports and the recent CQC reports in order to see what has been done to make improvements.

The questions and advice we were given is listed below:-

What steps have been taken to reduce risks associated with 'challenging behaviour'?

Two residents who were presenting with very challenging behaviour have now been reassessed and transferred elsewhere. Charts on behavioural issues are kept by staff and reviewed by the Manager weekly

Risks to residents and staff training

Have staff been trained to deal with 'challenging behaviour'?

Yes - In house training done by qualified nurse, on-line blended training and face to face training with Manager

Has 'Living with dementia' training been given to staff?

Dementia training is given to staff by the methods stated above

The Deputy Manager is trained in Dementia Care

Are residents referred promptly to the falls team' if thought necessary?

All falls are logged and reported to the Falls team, and trends are logged and one of the groups Physios visits Rowan Court regularly

Who makes this decision?

All staff in conjunction with the Manager, anyone having 2 or more falls in a month is referred and this recorded on their Careplan.

Medicine management of Topical creams

Has the practice of leaving Topical creams in bedrooms with no prescribing labels on stopped?

This has been addressed. Charts for administration of these creams are in all bedrooms which the staff have to sign. The Manager checks these.

Do staff know when and where to apply these creams?

Yes this is noted on the charts.

Do staff now record that these creams have been applied?

Yes.

What steps have been taken in the handling of these creams?

Training has been given and all creams with active ingredients are stored in the Nurses Clinical room.

Are usage instructions now available to staff?

These are noted on the charts.

Other issues

Is there still a strong smell of urine on Residential unit?

There is no smell of urine now

Has the issue of lunch being served at 2.15pm due to shortage of staff been resolved?

This has now been addressed and at meals times all catering staff, housekeeping staff and care staff assist the residents

Has the issue of staff having no time to read Care plans been resolved?

Yes - there are now folders in all bedrooms and a quick overview of needs at the front of the folder

Are there now sufficient staff to give the residents individual attention?

Yes - We observed Care staff sitting and chatting with 2 residents, Staff helping a lady mobilise and a gentleman being helped outside.

Do the residents feel safer because of increased staffing?

Hopefully, families have commented on the benefits to residents of the current changes.

Do the staff understand the responsibilities of reporting abuse and do they know how to do this?

Yes, all staff have received training in this and they know how to report such issues.

What steps have been taken to reduce the risk of staff being assaulted?

All staff had training in distraction techniques.

What steps have been taken to ensure that the Mental Capacity Act is being followed?

All staff had training and received small pocket card as an aide memoire.

How many staff have been on MCA training?

As above

Are the DOLS assessments up to date?

Manager has highlighted all residents who are in need of a DOLS assessment and is waiting on Social Services to attend to complete their paperwork, it appears that due to staff shortages they are only assessing priority cases at present

Do the staff feel supported?

We spoke with lots of staff who were all welcoming, cheerful, helpful and appear to be embracing the new regime at the Home.

Is there enough of them to do the job properly?

There now appears to be adequate staff to do the job properly.

Are they trained to do the job properly?

Yes.

Do they feel they can spend quality time with the residents

Yes, and this was evident as we walked round the Home.

What steps have been taken to preserve the dignity of residents?

All staff have had 'dignity supervision' including the housekeeping and maintenance staff

Are Care plans now being followed in respect of Catheter care, whether a resident requires thickened fluids etc?

Yes to both the above - Care plans evaluated daily and any changes are cascaded to all heads of areas including housekeeping and maintenance.

Do the Nursing unit now keep food and fluid records in place and up to date?

Yes, this is now done.

Other areas of observation

Activity room - Is this still as dark and dismal as before?

The Activity/Training room is now freshly painted and carpeted and has new furniture in it. The screen has been removed from the window as has the piano thus letting in maximum light. A lot of the activities now take place in the lounge areas

Is there still a mattress leaning on the wall

No, all areas have been decluttered

Summary, Comments and Further Observations It is evident that a lot of improvements have taken place. The increased staff levels have made things better for the residents and staff alike. The appointment earlier in the year of a new Manager and recently a new Deputy Manager seems to very positive, with staff embracing the changes made to improve the home and the additional training given. The staff appeared happy and are able to have more time for individual care for residents. The residents that we saw appeared comfortable and content.

It is pleasing to see that there has been an improvement to the environment with decluttering and the refurbishment of the Activity Room.

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We would hope that the continuing improvements will achieve an improved CQC rating at their next visit.

Recommendations and Follow-Up Action

We trust that the improvements we found on this visit will be maintained in the long term for the wellbeing of the residents.

Provider Feedback

No feedback has been received from the provider

DISCLAIMER

Please note that this report only relates to findings we observe on the specific date of our visit. Our report is not a representative portrayal of the experiences of all residents and staff, only an account of what was observed and contributed at the time
