

RochCare (UK) Ltd

# Royley House Care Home

## Inspection report

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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

Royley House care home is a residential care home providing accommodation and personal care for up to 41 people, some of whom are living with dementia. At the time of our inspection there were 13 people living at the home. The home is an adapted building set in its own grounds with accommodation over two floors. Only the ground floor was occupied at the time of this inspection.

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

Medicines were managed safely. Improvements had been made in staff knowledge, understanding and use of the electronic medicines system. The provider carried out recruitment checks to make sure staff were suitable to support and care for vulnerable people. There were enough staff to care for people safely. Staff had received training in safeguarding adults and knew how to recognise and report abuse or neglect. Infection control practices were in place and the home was clean and well maintained.

Relatives spoke positively about the home and told us they would recommend it. Since our last inspection management of the home had stabilised and changes and improvements had been sustained and embedded in practice. Quality assurance systems to monitor the service were in place and used effectively. There were arrangements in place to make sure any accidents, incidents and complaints would be fully investigated, and people and relatives would be involved and informed of the outcome. Relatives we spoke with were happy with the way the service communicated with them, although they commented they had not been asked to complete a satisfaction survey. This is currently being devised and distributed. Staff worked well with other healthcare professionals to ensure people's health needs were met.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was requires improvement (published 10 August 2021). There were breaches of two regulations. At this inspection enough improvement had been made and the provider was no longer in breach of regulations.

### Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection. This report only covers our findings in relation to the key questions of Safe and Well led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has improved to good.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Royley House on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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.

# Royley House Care 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 Care Act 2014.

This was a focused inspection to check whether the provider had made improvements following action we told the provider to take at the last inspection.

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

The inspection was carried out by an inspector, a member of the medicines team and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

Royley House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### 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 and gathered feedback from the local authority. The provider was not asked to complete a provider information return prior to this inspection. This is information providers are required to send us with key information about the service, what it does well and improvements they plan to make. We took this into account in making our judgements in this report. We used all of the information to plan our inspection

#### During the inspection

During the inspection we looked at a variety of records, including multiple care records, four medicines records and three staff recruitment files. We also looked at records relating to the management of the service, including quality assurance and monitoring systems, policies and minutes of staff meetings. We spoke with the registered manager and three members of the care team. The Expert by Experience spoke with nine relatives on the telephone.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at several other documents, including training records and staff rotas.

# Is the service safe?

## Our findings

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

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

### Using medicines safely

At our last three inspections the provider had failed to ensure medicines were managed safely. This was a breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found improvements had been made and the provider was no longer in breach of this regulation.

- Medicines were managed safely.
- People received their medicines as prescribed.
- The electronic medicines management system in place was understood by staff and was effective in ensuring all aspects of medicines' management were safe.
- Staff responsible for administering medicines had received appropriate training and had their competency assessed.

### Systems and processes to safeguard people from the risk of abuse

- Relatives told us they felt their loved ones were safe living at Royley House. Comments included, "I am now settled at night knowing that my relative is safe and looked after", "I feel my relative is safe at the home. When he walks outside his room the carers are always with him, he talks nicely about them and he is really happy there" and "I feel my relative is safe at the home. I ring him every week and can hear the carers with him. I can tell the interaction is good."
- Staff had completed recent training in safeguarding and knew how to recognise and report signs of neglect or abuse.
- The management team had a clear system in place to document and review safeguarding incidents, which included action taken by staff and any lessons learnt.
- All safeguarding concerns had been correctly reported to the local authority safeguarding team in line with local guidance.

### Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's health and wellbeing were assessed and appropriately managed. People's care records contained risk assessments linked to their support needs. These helped reduce the risk of avoidable harm. For example, people who smoked had risk assessments to ensure they and others were protected from the risk of fire.

- The provider had processes in place to record, investigate and monitor accidents and incidents. Lessons learnt were shared with staff following incidents.
- The management team carried out a monthly analysis of falls within the home. This included reviewing the time of the fall, where in the building it occurred, injuries sustained by the person and action taken. This helped identify any trends or patterns in people's behaviour which might put them at risk of falling.
- Annual servicing of equipment was up to date and regular maintenance checks of the premises were completed.

#### Staffing and recruitment

- Staff were recruited safely.
- Pre-employment checks were completed to ensure applicants were of suitable character to work with vulnerable people. This included completing checks with the Disclosure and Barring Service and seeking references from previous employers.
- There were enough suitably trained staff to support people in line with their wishes and care plans.

#### 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 meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.



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

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

At our last inspection we found a continued breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was because the provider had not made sufficient progress in improving the oversight of the service.

At this inspection we found improvements had been made and the service was no longer in breach of this regulation.

- The improvements implemented following our last inspection had been sustained and further embedded in practice. The electronic medicines management system and care documentation system were better understood by staff and were used correctly.
- There was improved stability in the management of the service. The registered manager and provider had worked closely with the local authority and with an external care consultant to ensure oversight of the service was further developed.
- The registered manager used a range of audits to assess and monitor the quality of the service.
- The provider understood their legal responsibilities, including following the requirements of their registration by submitting notifications and other important information to CQC as necessary.

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

- Relatives expressed confidence in the management of the service and told us they would recommend the home. Comments included; "I would definitely recommend the home 100%. [Name] is really happy and settled", "I would recommend the home. It is the caring staff and personalised individual care" and "I would recommend the home; they do a good job and look after my mother well. She seems to be happy there."
- Staff spoke positively about the home and were complimentary about how it was managed. One staff member said, "Things are being changed, but it's for the better."

Continuous learning and improving care; 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 service investigated all accidents, incidents and concerns, and were proactive in putting things right.
- The registered manager and provider were aware of their responsibility regarding duty of candour. We saw

examples of how the service had responded in an open and transparent way when things had gone wrong.

Working in partnership with others; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The management team and staff had close links with other professionals and agencies to ensure people's health needs were met. For example, the service had recently joined a project run by health professionals to improve the management of falls.
- Daily handover meetings helped ensure vital information about people's health needs was communicated to staff. Other important information, such as changes to guidance and policies, was shared with staff via a daily memo and through regular staff meetings.
- Relatives were generally happy with the way the service communicated with them and kept them informed. One person told us, "I certainly feel listened to with the new manager." However, most commented that they had not received a satisfaction survey to provide feedback or give their views on the home. The registered manager told us a satisfaction survey was in the process of being distributed.