

# The Bridgings Limited

# Rosewood

## Inspection report

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## 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

### About the service

Rosewood is a residential care home for up to eight adults with learning disabilities, some of whom have associated physical disabilities. People live in one adapted bungalow. At the time of inspection, six people were using the service.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

The service was a large home, bigger than most domestic style properties. The service fitted in well within the residential area where it was located. There were no identifying signs at the front of the home to indicate it was a care home. Industrial bins at the rear of the property were adequately concealed. Staff were also discouraged from wearing anything that suggested they were care staff when coming and going with people.

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

People had access to regular opportunities to enhance their social well-being. The high standard of care which people received from staff led them to achieve positive outcomes. People said they were very happy living at the service and had developed meaningful relationships with staff.

Staff demonstrated excellent knowledge and understanding of people and their individual needs. They were responsive to the risks and challenges which people faced. There were always enough staff on duty to safely care for people. Staff worked together as a team and were adaptable to change. This supported people to receive person-centred care.

Staff were supported to carry out their roles. They were supportive of each other and respected the registered manager. They were committed to the people using the service. Quality assurance measures were effective and had led to continual development at the service. People had been central to this.

People were supported with their well-being. They had attended healthcare appointments and had been supported to make decisions about health screening and vaccinations. Medicines were safely managed. Good support was in place to support people with their nutritional needs.

People were involved in their care and were supported to make decisions. Rooms were individually decorated and reflected people's personalities. Care was continually dignified, and people were supported with their independence. Some people were involved in activities of daily living at the home.

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 service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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 good (published 19 July 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

# Rosewood

## 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.

#### Inspection team

One inspector carried out this inspection.

#### Service and service type

Rosewood 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 inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the Redcar & Cleveland, Middlesbrough, Stockton-on-Tees and North Yorkshire local authority commissioning teams and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. 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 of this information to plan our inspection.

During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with two relatives over the telephone and three social workers via email. We spoke with five members of staff including the registered manager, and four support workers. We carried out observations of practice.

We reviewed a range of records. This included two people's care records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

# 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 as good. At this inspection this key question has now remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risks of abuse. Staff practices ensured people remained safe. Where safeguarding concerns had been identified, staff had acted quickly and followed the correct procedures to reduce any potential risks.
- People, relatives and professionals confirmed people were safe. Staff were proactive and supported people's rights and preferences.

Assessing risk, safety monitoring and management

- Staff demonstrated good knowledge of the risks people faced. They were adaptable to change and had sought appropriate support to minimise any potential risk of harm. Staff knew people well and were able to support them to take positive risks.
- The safety of the building had been maintained. Staff participated in planned fire drills and detailed records were in place to safely evacuate people in an emergency.

Staffing and recruitment

- Staff with the right skills and experience had been recruited. Appropriate checks to support safe recruitment had been carried out.
- There were always enough staff on duty to meet people's needs. Staffing levels were flexible to support people with their well-being. Relatives said there were always enough staff and they were always visible.

Using medicines safely

- Medicines were safely managed. Detailed records were in place and staff had received up to date training to dispense medicines.
- A recent external check of medicines had been positive. This demonstrated that good practices were in place to support people with their prescribed medicines.

Preventing and controlling infection

- The home was clean throughout. Staff followed good infection control procedures. They had access to equipment to manage the risks of cross infection.

Learning lessons when things go wrong

- Staff were open and honest. When things went wrong, they reviewed them together as a team and put new procedures in place. Accidents and incidents were thoroughly reviewed. These systems supported people to continually experience good care.

# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has now remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Holistic assessments were completed prior to admission into the home. These supported staff to ensure people's needs could be continually met. People's care was in line with best practice guidance and was regularly reviewed.
- Staff sought support from health and social care professionals when people's needs changed to ensure their needs could continue to be met.

Staff support: induction, training, skills and experience

- Staff were supported to deliver good care to people. This included an in-depth induction. Staff understood that people needed time to get to know people and develop a relationship with them.
- Staff participated in regular supervision and training. Staff were experienced and supported each other to continually develop their skills and knowledge. When people's needs changed, they used knowledge to develop new support plans for people.
- Relatives and professionals said staff had the right training to support people. Observations during the inspection confirmed this.

Supporting people to eat and drink enough to maintain a balanced diet

- People's nutritional needs were met. Detailed support plans were in place for people with specialist nutritional needs. Health professionals had been involved when needed and nutritional recommendations had been followed.
- People were involved in menu planning, shopping and preparation of meals. People spoke positively about meals. Mealtimes were relaxed, and people were provided with the support which they needed.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff sought support from professionals when people were referred into the service or moved to another service. This ensured a smooth transition for people.
- People were supported with their healthcare needs. Regular check-ups had been completed and people were supported to attend hospital appointments.

Adapting service, design, decoration to meet people's needs

- The home had been modified to meet people's needs. The environment was spacious, and people's bedrooms reflected their individual personalities.

- Adaptations were in place to support people with their care. This enabled people's independence.

#### Ensuring consent to care and treatment in line with law and guidance

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 Act 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 MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA.

- Staff followed the principles of MCA. DoLS applications had been submitted in a timely manner and best interests decisions had been robustly recorded.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has now remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- Staff were very caring. People were consistently treated with kindness and compassion. Staff had developed supportive relationships with people and their families. They were skilled in communicating with people and were adaptable to people's needs.
- People were supported to maintain and develop their interests, preferences and values. Staff were respectful and understanding of people. They championed people's rights and supported people to do all which they wanted to do.
- Relatives were very happy with the care their loved ones received. Comments included, "The home is brilliant, I can't fault them at all. The staff are brilliant with [person]." And, "The home is fantastic, the best place [person] has been in. [Person] goes out regular and seems very happy. The staff really look after [person] very well. I am happy."

Supporting people to express their views and be involved in making decisions about their care

- People were actively encouraged to make their own decisions. Staff helped people to understand information given to them and the choices available to them. Independent support had been sourced for people who needed additional support.
- Relatives and professionals were invited to give their views. This holistic approach to people's care led to positive outcomes. Relatives said, "They [staff] keep me informed [about everything]." And, "I visit regularly, I am always welcomed. Staff keep me up to date. I feel very involved."

Respecting and promoting people's privacy, dignity and independence

- Staff practices encouraged people to be as independent as they could be. Good procedures were in place to support people to take positive risks and manage their monies.
- Staff acted quickly when people needed additional support. They knew people extremely well and could anticipate when people's needs, or behaviours were about to change. Quick action from staff prevented any deterioration in people's well-being.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has now remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received consistently good individualised care. They had choice in all aspects of their care. Records relating to people's well-being supported staff with people's individual routines, as well as needs, wishes and preferences.
- Professionals were positive about the level of individualised care which people received. Comments included, "The home has a homely environment with staff who deliver a high standard of care and support." And, "The staff team have been observed to interact well with the residents. Staff showed good knowledge of the residents with whom they are working."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff followed the AIS. Information was available in a variety of formats to meet people's individual needs.
- Care records provided detailed information about people's communication needs. Staff spent a long time shadowing experienced staff until they got to know how to communicate with people.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People participated in regular activities designed to increase their social well-being. This included hand and leg massage, crafts and games. People participated in their own interests and activities at the home. Staff supported people to do this.
- People regularly went out into the community. They had developed good relationships with other people and businesses in their community. People and staff also went on day trips to farms and to the coast, as well as to concerts. People had been on short breaks to Scarborough and Chester. Some people attended day centres.

Improving care quality in response to complaints or concerns

- No complaints had been made. Relatives said they felt able to talk to staff if they needed to and were confident they would be listened to.
- Staff knew people well enough to determine if people were not happy. This meant they could take action to understand how people were feeling. Information in an easy read format was available for people.

## End of life care and support

- No-one was receiving this type of care at the time of inspection. The home was equipped to provide people with this type of care if needed and good relationships were in place with health professionals to access support from.

# 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 as good. At this inspection this key question has now remained the same. 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

- Staff at all levels demonstrated the knowledge and competence to deliver good care to people. They were a highly effective and skilled team who were committed to the service and its continual development. One staff member said, "I love it, I really do. I will speak up about people's rights. It's a lovely, lovely place. I would absolutely put my family in here."
- The values of service were reflected in the day to day running of the service. People were at the heart of their care and relatives and professionals were extremely positive about the overall level of care which people received. An open and transparent culture was in place.

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

- An effective registered manager was in post. They supported the staff team to be the best they could be. This led to consistently good care being delivered which kept people safe and allowed them to have access to as many opportunities as they wished. A staff member said, "[Registered manager] is smashing. She is approachable and listens. She gets where we are coming from."
- Quality assurance measures were effective. These supported the continual development of the service. Staff had a good understanding of risk and they reviewed risk and incidents to reflect on their practices.
- Staff were committed to learning and development. They continually evaluated people's care and the support they provided. They were confident in making changes to improve the overall quality of care which people received.

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

- Feedback was used to drive improvement. Decisions about the service were communicated at all levels. People and relatives had been kept up to date with recent changes to the environment and planned changes to the running of the service.
- The home had good links with the local community. Organisations were welcoming of people and supported them to access their services.
- The home had good relationships with professionals. They were extremely positive about the service. Staff implemented recommendations from professionals and provided them with accurate information when

needed.