

Norse Care (Services) Limited

# Laburnum Grove Housing with Care Scheme

## Inspection report

48 Laburnum Grove  
off Elm Road  
Thetford  
Norfolk  
IP24 3HS

Tel: 01842753185

Website: [www.norsecare.co.uk](http://www.norsecare.co.uk)

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## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

### About the service

Laburnum Grove is a housing with care scheme. People live on site in their own flats and have a tenancy agreement with a housing provider. Norse Care provides care and support over a twenty-four-hour period. There are 30 flats within the scheme at Laburnum Grove.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. At the time of our inspection, 25 people were receiving personal care.

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

The people and relatives we spoke with were extremely happy and complimentary about the quality of care provided by the management and staff at Laburnum Grove. One person had recently fed back to the service how loved and special they were made to feel by the staff. A relative told us, "It has changed my family member's world, being at Laburnum Grove." Without exception, everyone we spoke with including people, relatives, staff and external professionals said they would recommend the service to others.

There was very strong leadership in place. The registered manager was passionate in their drive to ensure both the staff and people who used the service were well cared for and their wellbeing enhanced. They empowered staff to be creative when doing their job, which in turn gave staff a sense of pride working at Laburnum Grove. This made them feel happy and valued which impacted on people's lives. Staff had no hesitation in going the extra mile to provide people with comfort and compassion when needed.

There was a strong team of staff at Laburnum Grove who demonstrated a culture of putting people first in everything they did. This was evident from the feedback we received from both people and relatives during this inspection. External professionals also commented on how well the service worked with them, to ensure people received a high standard of care.

The registered manager and staff were innovative and worked in collaboration with people using the service. Examples of this included the introduction of support groups for people living with mental health conditions or dementia. Another support group had been set up to help people keep themselves safe. These were open to the wider community, relatives and staff to provide them with knowledge and a sense of social engagement.

The registered manager and staff had taken time to get to know people well. This enabled them to provide people with care in a way they wanted to receive it. People were supported to participate in events that supported their hobbies, interests and independence, which enhanced their wellbeing.

The registered manager and staff were strong advocates for people, particularly as they approached the end of their life. This ensured as much as possible, people's individual wishes were respected.

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. Risks to people's safety had been assessed and managed well but if they wanted to take informed risks, the staff respected this. Systems were in place to protect people from the risk of abuse.

There were enough staff to meet people's needs and people received their medicines when they needed them. The staff were well trained and knowledgeable. They received regular supervision and support to keep their skill up to date and their care practice safe. Staff were vigilant of people's wellbeing and were quick to alert the relevant professionals to ensure people received the necessary support with their health.

Good governance systems were in place to monitor the quality of care provided. The registered manager was keen to continuously improve people's experience of care. When things had gone wrong, lessons had been learnt and steps taken to reduce the risk of the error from happening again.

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

The last rating for this service was Good (published June 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?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Details are in our responsive findings below.

### Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our well-Led findings below.

# Laburnum Grove Housing with Care Scheme

## **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

The inspection was carried out by one inspector 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

This service provides care to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate the premises used for extra care housing; this inspection looked at people's personal care service.

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 announced. We gave the registered manager 24 hours' notice of the inspection visit as we needed to be sure they were available to speak with us.

#### What we did before the inspection

We reviewed information we had received about the service since our last inspection. We sought feedback

from the local authority who are a commissioner of 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.

During the inspection

On 28 October 2019, the Expert by Experience telephoned people and relatives for feedback on the quality of care received. A visit to the service took place on 5 November 2019. In total we spoke with five people and five relatives about their experience of the care provided. We spoke with six members of staff including the registered manager, deputy manager and care workers. We also spoke with two visiting healthcare professionals.

We reviewed a range of records. This included three people's care and medication records. We looked a variety of records relating to the management of the service.

# 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 remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems had been designed and implemented to protect people from the risk of abuse.
- People felt safe using the service and their relatives agreed with this.
- Staff had received training in safeguarding and had a good knowledge about the subject. Any concerns had been reported and investigated appropriately.
- Regular meetings had been held with people and their relatives regarding safeguarding. Here, information relating to any possible criminal activity including telephone scams was discussed. Advice and information were provided to help people keep themselves safe.

Assessing risk, safety monitoring and management

- Risks to people's safety had been assessed and managed well.
- Staff were knowledgeable about risk management and demonstrated they supported people's safety. For example, one staff member told us how they were working with a person to help them put on weight to improve their health.
- People's care records demonstrated risks to their safety had been discussed with them and/or a relative. People's wishes regarding how they wished to manage risks were respected. For example, some people ate a diet of their choice even if this was against medical advice. This demonstrated a person-centred approach to risk management.

Staffing and recruitment

- There were enough staff to meet people's needs.
- People and relatives were satisfied staff were available to assist them when they required this. One person told us, "I just call, and someone will come to support me. I think it is a quick response."
- The staff said they were able to provide care to people when they needed it.
- The registered manager had ensured staff were of good character before allowing them to work within the service.

Using medicines safely

- People's medicines were managed safely. People said they received these when they needed them, and staff had received training in how to give people their medicines safely.
- Records had not been updated correctly to show two people had received two of their medicines. The registered manager immediately reminded staff of the importance of completing the records accurately.
- Risks associated with people receiving their medicines had been assessed and regularly reviewed. Some people managed their own medicines to aide their independence.

### Preventing and controlling infection

- Systems were in place to reduce the risk of infection.
- People said staff used precautions such as wearing gloves and aprons when providing them with care.
- Staff had received training in infection control and demonstrated they understood how to reduce this risk effectively. They had access to enough personal protective equipment such as gloves when needed.

### Learning lessons when things go wrong

- Lesson were learnt, and changes implemented when things had gone wrong.
- Staff understood the importance of reporting incidents when they occurred. The records we looked at showed incidents had been reported appropriately.
- The registered manager had investigated incidents thoroughly and acted to reduce the risk of them re-occurring. For example, following some medicine errors the registered manager had introduced a new system where staff were not disturbed when they were giving these to people. They told us this had reduced the number of errors.



# 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 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

- People's needs had been holistically assessed. These included their physical, mental health and social needs. People's diverse and cultural needs had also been considered.
- The registered manager demonstrated a good understanding of best practice guidance. For example, they had implemented changes to enhance the environment for people living with dementia.

Staff support: induction, training, skills and experience

- Staff had received a good level of training to enable them to provide people with effective care. People and relatives felt the staff had the right skills to support them. One person said, "Yes the staff do have training, the staff have to go on training courses."
- Staff said they had completed training in several different subjects that were tailored to people's individual needs. One staff member told us they had completed a course about Parkinson's disease to give them a better understanding of this condition.
- Staff received regular supervision and guidance from the registered manager. The supervision meetings were thorough and covered several different areas including staff training and wellbeing.
- All staff said they felt supported in their role and were encouraged to complete qualifications within health and social care.

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

- Where people received support from the staff to eat and drink, they told us this was done to their satisfaction.
- Staff monitored people's eating and drinking and where they were concerned, took steps to work with the person to improve this. For example, one staff member said they were supporting a person living with dementia to continue to make their own meals. This they said, was helping them retain an interest in food and maintain their weight.

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

- The service worked in collaboration with other health and social care professionals when people moved to the service and to support them with their healthcare.
- The registered manager held joint meetings with the housing association, social care professionals and staff when arranging for a person to move to the service. This was to ensure the service was right for the person and could meet their needs.
- Staff demonstrated a good understanding of people's individual health needs and were vigilant to these.

We saw staff immediately report a concern regarding one person to a GP. The GP prescribed some medication which the staff were arranging to collect.

- The healthcare professionals we spoke with said staff were excellent at identifying issues with people's health and reporting them in a timely manner. They added the staff closely followed any advice they gave to help the person recover or manage their condition.

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 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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- People's consent had been sought in line with the relevant legislation. People and relatives told us staff were polite and always asked for consent before performing a task.

- Staff had a good understanding of the MCA and said they supported people to make their own choices when needed. For example, showing people different outfits they could wear.

- Records showed people's capacity to consent to a decision had been considered where it was in doubt. Where people could not consent, relevant individuals had been involved to ensure any action taken was in the person's best interests.

# 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 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

- People were consistently treated with kindness, compassion and respect. They were listened to, made to feel special, and that they mattered.
- People and relatives said the management team and staff were very kind and without fail, treated them with respect. They described the staff as 'family' or 'friends'. They added the staff made them feel that 'nothing was ever too much trouble'.
- People said staff were intuitive to their needs and feelings and always alleviated any distress or worry they had. One person said this had been very important to them at a difficult time in their life. They told us, "There is nowhere else I would rather be than here. I am not on my own. They supported me so well through that difficult time, always coming to see me and checking I was okay. They are like family to me. They just seem to know me and how I am feeling without me having to tell them."
- Relatives said staff also supported them and showed genuine compassion. One relative told us, "I have nothing but praise for the staff and managers. They are always willing to help, and they often go above and beyond what is expected. They really see the person as a person, rather than as a task. It just comes natural to them." This was echoed by another relative who had recently provided feedback to the service. They had written, 'Staff treat people with kindness, patience and in a professional way, to a degree that goes well beyond simply fulfilling the requirements of the job.'
- Conversations with staff demonstrated they knew people extremely well. The way they spoke about them showed us they genuinely cared and only wanted the best for them.
- People, relatives, and the management team told us staff often went above and beyond what was expected of them to provide people with comfort. For example, a staff member had taken a person to a special family event which they would otherwise have missed. Another had visited a person whilst they were in hospital to provide them with company. These had been done in the staff member's own time.

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

- People and relatives could freely express their views and make decisions about their care. People were able to feedback on the care they received in several different ways including surveys and at meetings.
- People had been involved in recruiting new staff to the service. The registered manager told us people would give their views regarding the potential staff member's suitability, with any decisions being made together.
- Relatives were kept up to date with their family member's care. One relative said, "Nothing is ever too much trouble here. They keep me fully informed and [family member] and me are involved in the decision-making process." Another relative had recently told the service, 'There is a general determination from staff

to make people feel they are working with them in partnership and co-operation for whatever task they are doing.'

- People and their families were provided with information about other services that may be of relevance to them. This included organisations who provided support with advocacy, dementia and safeguarding.

Respecting and promoting people's privacy, dignity and independence

- Privacy and dignity were at the heart of the services culture and staff fully understood the importance of this. They always asked people their preferences in this area and respected people's choices. For example, how people wanted staff to assist them with personal care. Staff said they respected people's personal boundaries.

- People and relatives said without fail, staff ensured people's dignity and privacy was respected. One person told us, "I had a fall once in the shower. Staff came very quickly and instantly put a blanket over me to protect my dignity. I didn't need to ask them, they just did it and that was so important to me."

- Staff encouraged people to be independent to help facilitate a sense of worth and purpose. One person would set and dress the tables for lunch, another would fold napkins. A further person would write poems for the service's newsletter which was produced for people and relatives. A relative told us, "It's the little things they do like make sure all her bits and pieces are near her, so she can do things herself, like turn the TV on."

# 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 improved to Outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- There was a strong emphasis of providing people with support that met their individual needs and enhanced their wellbeing. This approach was successful at reducing people's feelings of social isolation and anxiety.
- People and relatives were extremely complimentary about the changes made to their or their family members lives since using the service. A relative told us, "Being in Laburnum Grove has changed [family member's] world. They used to be a very social person but then became very socially withdrawn and lonely due to friends passing away. However, since being here they are always smiling, happy and socialising with people. They are back to their old self. It is so great to see [family member] laughing." The relative said this had been possible due to staff taking the time to understand their family member and providing support specifically tailored to them. Their family member enjoyed singing and staff encouraged them to participate in this. A choir had been set up to make this a more social event and we saw several people enjoying this during our visit to the service.
- Healthcare professionals told us the service was focused on delivering person-centred care which were achieving exceptional results. One said they had seen a remarkable change in a person since using the service. The person had been withdrawn, lonely and not looking after themselves whilst at home. Now the person was always up and dressed, brighter, happier and eating better. They added the person's health had improved. They attributed this to the hard work and dedication of the staff and management, who had got to know the person and provided them with individualised care.
- Staff had excellent knowledge about people's backgrounds which helped them provide tailored support to people. One staff member told us about a person who had been withdrawn and not eating or drinking very much. Staff worked with the person who had a strong desire for routine and friendship. Together they worked out a routine that worked for them. This included an afternoon 'tea group' to provide a regular social outlet for them. It also benefited other people using the service and within the local community. Staff told us this had greatly improved this person's health and wellbeing. They were now happy and more outgoing and were also using less anxiety medication than previously.
- Other people were supported and encouraged by staff to participate in activities to enhance their wellbeing. For example, one person wrote articles for the newsletter and helped with office activities such as writing minutes. Another person was assisted to do baking which they enjoyed. Staff helped another person continue their passion for plants and flowers by providing them with the means to plant seeds and tend flowers.
- People and relatives had been fully involved in the assessment of their/their family member's needs and

preferences. This information was available to staff to help them provide people with tailored care. The information was clear and regularly reviewed.

- The registered manager and staff held regular support groups to facilitate people's understanding and involvement in their own care. These covered dementia, mental health and safeguarding. These had been set up in collaboration with people and relatives following the recognition that some were seeking help and support in these areas.

#### End of life care and support

- People's preferences, choices and wishes had been sought regarding their end of life wishes.
- A healthcare professional said staff provided people and relatives with a very high standard of care at this time and acted as strong advocates for people. They gave an example where the service had been advised to move a person to hospital. The staff however, had been determined to ensure the person's wishes to remain at Laburnum Grove were respected. Therefore, they had worked closely with the clinical team to implement a different strategy so the person could pass away at the service, whilst also receiving the appropriate clinical care.
- A relative told us how they had been highly impressed with the support they and another family member had received at this time telling us, "They were so kind and compassionate. They were always keeping me and [family member] updated with the situation. [Registered manager] and staff would give [family member] a cuddle when needed."
- The registered manager told us that as people reached the end of their lives, staff would often sit with them in their own time if the person had not wanted to be alone. They also ensured extra staff were available to support the person and family if required.
- The service was trialling an innovative method to provide comfort to people who had to remain in bed at this time of their life. This involved using a projector to place images on the ceiling of things important to the person. This had not yet been used but the registered manager said it was available if people wished to have this in place.
- The registered manager and staff had completed a project to find out what was important to people of various cultures as they approached the end of their lives. They advised this information was utilised by staff in conjunction with people and their relatives to help drive conversations in this area. This information was available in a folder for staff and people within the service, which they could access to enhance their knowledge.

#### 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.

- People's communication needs had been fully assessed. There was clear information within people's care records to guide staff on how to communicate with people effectively in line with their individual preferences. Information was available in various formats such as large print to meet people's communication needs.

#### Improving care quality in response to complaints or concerns

- People and relatives knew how to raise a concern or complaint but told us they had no complaints. They said they felt comfortable to raise an issue if they needed to. One person said, "The manager is always available, or their deputy and I would speak to them, but I have no complaints."
- The registered manager told us they welcomed concerns or complaints to help them drive improvement within the service. They demonstrated they would deal with any complaints appropriately should they be

raised.

# 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 improved to Outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 provider and management team had instilled a strong inclusive, collaborative, open and person-centred culture within the service. People and staff were at the centre of everything they did.
- Everyone we spoke said the leadership within the service was strong. A healthcare professional described the leadership as 'exemplary'. Everyone recommended the service provided by staff at Laburnum Grove with one person saying, "I would certainly recommend this place. I was really worried what would happen to me, but I am so happy I came here." A relative had commented recently to the service, '[Family member] has told me 'I love it here, we have such fun'. That to me is Laburnum Grove. What more can be said about this amazing place. The staff are all amazing and super helpful. What more can be said to endorse it but that a person in their nineties is having fun.'
- The management team demonstrated passion, commitment and dedication. They cared deeply for the people using the service and staff who worked there. This had led to a happy, professional and motivated staff team who thought nothing of going the extra mile for people. One relative had recently commented to the service, 'There is a strong ethic of teamwork, kindness and patience at Laburnum Grove. There is strong leadership in place which staff respond to positively. I have seen [registered manager] and [deputy manager] treat people with great care and compassion. This is the best place for [family member] and provides her with the best quality of life.'
- The management team had instilled the provider's visions and values which staff understood and implemented. Staff told us they felt truly valued and were always thanked and praised for the job they did. A relative told us, 'It is obvious from speaking to staff that they have great pride working at Laburnum Grove, I really cannot fault them.' Two staff members said it was a pleasure to work at Laburnum Grove and told us that it 'doesn't really feel like work.'
- Each year the provider held an award ceremony to celebrate and recognise exceptional performance across their 37 services. Several people, relatives and professionals had nominated Laburnum Grove for the 'Team of the Year' award which they subsequently won. The registered manager and staff team were extremely proud of this achievement.
- The registered manager had recently asked for feedback from staff on their management style to see if it could be improved. All the comments were very complimentary. Some of these included, 'I always feel valued and supported. She is the most supportive manager I have known', 'She arranged transport for me, so I could get to training as I cannot drive. She is always there to provide support if I need it' and 'She is open, honest and approachable. She is a beacon of energy and good humour. She always makes time to



speak with me and people, no matter how busy she is.'

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

- The registered manager was very experienced and highly respected by the people using the service, their relatives and the staff. The registered manager attended regular meetings with the provider's other managers, where best practice and strategies to improve the quality of care given were discussed.
- The provider utilised the registered manager's skills and experience to support new managers working for them. They were also involved in undertaking internal investigations at the provider's other services when required.
- The registered manager understood their role and regularly requirements. Good governance systems had been implemented to monitor and drive improvement within the service. Staff also understood their individual roles and were supported to gain qualifications and promotion through the providers 'Emerging Talent' programme. One staff member excitedly told us how they had gained a promotion within the service and were being supported to develop further.
- The registered manager was looking to continually improve the quality of care people received. They had a development plan in place to monitor this. Recent improvements that had been made included the introduction of a staff wellbeing room, and a new system to monitor people's health and wellbeing. The registered manager told us this new system helped them act quicker when people's needs changed. One relative we spoke with confirmed this saying, '[Family member] became unwell recently. They were on it like a shot and she soon recovered.'

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

- The management team were innovative in their approach to engaging people, relatives and staff. They had recognised that support was required for some individuals in relation to dementia and mental health. Support groups covering these subjects were therefore set up with staff empowered to run them. These were open to people, relatives, staff and the wider community. Records showed these had been well attended. Fun had been added to the meetings through the participation in an activity that staff knew people would enjoy. A staff member told us how much confidence they had gained from running one of these groups.
- In collaboration with staff, the registered manager had set up a 'wellbeing' room for them. This was furnished with exercise equipment and a relaxation chair, along with optional eye masks staff could wear. These had either all been donated by the management team or bought by them for the staff. One staff member told us how much they enjoyed using it.
- Strong links with the community had been established. People living in the local community joined the regular dementia support groups and other events such as BBQs or at Christmas. Links with local schools had been made, with the service offering work experience for students to increase the awareness of careers within social care.
- The healthcare professionals we spoke with and the feedback the service recently received from other professionals, demonstrated they worked well together for the benefit of people using the service. One professional had recently told the service, 'The management have excellent communication skills. They have a good relationship with social services which enables a smooth transfer into the service.'