

M S Frois

Grange Cottage

Inspection report

Albert Road Grange Over Sands Cumbria LA11 7EZ

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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

We carried out this unannounced comprehensive inspection on 8 July 2016.

Grange Cottage provides care and accommodation for up to nine people who need personal care. The home is situated in the small town of Grange over Sands on the coast of Morecambe Bay. The property is a large six bedroom cottage, five with ensuite facilities. There are three one bedroom ensuite rooms in a bungalow in the adjoining garden. The property has been adapted and extended for its current use as a care home.

At the time of our inspection there were six people living in the home.

There was a registered manager employed. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At our last focused inspection of this home on 26 November 2015, we asked the provider to take action to make improvements to staffing, staff training, staff recruitment processes, how medicines were managed and fire safety. Following the inspection the registered manager took immediate action to protect people from the risk of harm. They also wrote to us detailing the actions they had taken and planned to take to ensure the quality and safety of the service.

At our inspection on 8 July 2016 we found these actions had been completed. The processes used when new staff were employed had been improved, there were enough staff to care for people and all staff had completed appropriate training. Medicines were managed safely and people had been protected against the risk of fire.

We saw that people were treated with kindness, patience and respect. They made choices about their lives and the decisions they made were respected.

People were safe living in the home. They were protected against abuse and avoidable harm. Hazards to their safety had been identified and action taken to manage the risks identified.

People were provided with a choice of meals and drinks that they enjoyed. Activities were provided to take account of people's interests and preferences.

There were enough staff, with the skills and knowledge, to provide the support people needed. The staff knew people well and provided their support as they wanted.

People were supported to access appropriate health care services to ensure they maintained good health.

Visitors were made welcome in the home and people could maintain relationships that were important to them

The registered manager worked with the staff in the home providing guidance and overseeing the quality of the service. People knew the registered manager and were comfortable speaking to her. They knew how they could raise concerns and were confident action would be taken if they did so.

People were asked for their views and were included in developing how the service was provided.

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

Improvements made following our last inspection of the home had been sustained to ensure people received safe care.

Risks to people's safety had been identified and managed.

There were enough staff to provide the support people required. New staff were checked to ensure they were suitable to work in the home.

Medicines were handled safely and people received their medicines as their doctors had prescribed.

Is the service effective?

Good



The service was effective.

The staff were trained and had the skills and knowledge to provide the support that people needed.

The registered manager was knowledgeable about the Mental Capacity Act (2005) (MCA) and her responsibilities around promoting people's rights.

Meal times were pleasant and sociable occasions. People were given a choice of meals and drinks that they enjoyed.

People were supported to access appropriate health care services to ensure their health was maintained.

Is the service caring?

Good



The service was caring.

People were treated with respect and in a kind and caring way.

The staff knew people well and respected the decisions they made about their lives.

People were supported to maintain their independence. Good Is the service responsive? The service was responsive. People were included in planning and agreeing to the support they received. Activities were provided that took account of individual's choices and interests. People knew how they could raise concerns and were confident action would be taken if they did so. Is the service well-led? Good The service was well-led. The registered manager worked with staff in the home providing guidance and overseeing the quality of the service. People knew the registered manager. They were asked for their views about the care they received and were included in developing how the service was provided.

The registered manager was open to feedback about the service

and had taken action to address areas that required

improvement.



Grange Cottage

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This unannounced inspection was carried out by one adult social care inspector on 8 July 2016.

During the inspection we spoke with the six people who lived at the home, the staff member on duty and five visitors. We looked at the care records for three people. We also looked at staff training and recruitment records and records that related to how the service was managed.

Before the inspection, the registered manager completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed the PIR and other information we held about the service to plan our inspection and the areas to look at. We also contacted local social work and commissioning teams and health care services to obtain their views about the home.



Is the service safe?

Our findings

People who lived in the home told us that they felt safe. They all said that they had no concerns about their own safety or the safety of the other people who lived at Grange Cottage.

All of the visitors we spoke with told us that they were confident people were safe living in the home. One told us, "We have never had any concerns at all."

At our focused inspection in November 2015 we found concerns around staffing, staff recruitment processes, management of medicines and fire safety. We found breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in relation to Regulation 19: Fit and proper persons employed, Regulation 15: Premises and equipment and Regulation 12: Safe care and treatment.

Following the focused inspection the registered manager wrote to us and told us of the actions they had taken and planned to take to ensure people were safe in the home. We looked at these areas again during our visit in July 2016. We found that the safety of the service had been improved and sustained. There were enough staff to support people, the information required by law had been obtained when new staff were employed, people were protected against the risk of fire and medicines were managed safely. The registered manager had taken appropriate actions to address the concerns we had found at the inspection in November 2015.

During our inspection in July 2016 there was one staff member on duty working with the registered manager of the home. We saw that people received the support they needed promptly and the staff member and registered manager had the time to provide people's support and to sit and talk with people. There were enough staff on duty to meet people's needs.

People we spoke with told us that they liked the staff who worked in the home and the registered manager. They said they received the support they required during the day and at night. One person told us, "I never have to wait, the staff always come when I need."

The staff member on duty told us that people were safe in the home. They understood their responsibility to protect people from the risk of abuse. They told us that they would speak to the registered manager if they had any concerns about the safety of a person who lived there.

We looked at the records around staff recruitment. We saw that staff recruitment procedures had been improved to ensure all the information required by law was obtained before new staff were employed. People who lived in the home could be confident new staff had been checked to ensure they were suitable to be employed in a care service.

We looked at three people's care records. We saw that risks to their safety had been identified and there was guidance for staff on how to protect people from harm.

Some people enjoyed sitting in the garden at the front of the home. We saw that the registered manager was making improvements to the garden, planting new shrubs and making a pleasant space for people to enjoy. The garden was enclosed and fitted with a secure gate to protect people who may have been at risk if they left the home on their own. People had a safe and pleasant outdoor area to sit in.

We checked how medicines were stored and handled in the home. We saw that medicines were stored securely to prevent them from being misused. The records of medicines that had been given to people were completed properly. The registered manager had carried out checks on the medication administration records. This helped her to be confident that staff were handling medicines safely and people were receiving their medicines as their doctors had prescribed.

Following our inspection in November 2015 we contacted Cumbria Fire and Rescue Service to share the concerns we had found around fire safety. They carried out a full fire safety audit of the home in January 2016 and assessed that satisfactory arrangements were in place to protect people in the event of a fire.

At this inspection in July 2016 we saw that the improvements to fire safety had been maintained. Care staff had received regular training in the actions to take in the event of a fire and regular checks had been carried out on the equipment in place to detect and protect people from fire. The records we looked at included detailed, up to date personal evacuation plans that informed staff how to assist individuals to leave the home in the event of an emergency. We also found there were no flammable materials stored in the boiler room, which could cause a fire to spread and place people at risk.

We saw that the improvements required to the safety of the service had been carried out and maintained. People received a safe service and were protected from abuse and avoidable harm.



Is the service effective?

Our findings

People told us that this was a good home and said the staff employed in the home knew the support they needed and provided this as they required. We received many positive comments about the staff who worked in the home. One person told us, "The girls [care staff] are all very good" and another person said, "You couldn't ask for better staff, they are all wonderful."

Visitors we spoke with said they were confident that people were well cared for in the home. They told us they had never been concerned about the competence of the staff employed there. One visitor told us, "This is a good home, we have been more than happy, the staff are all very good and [the registered manager] is fantastic at her job."

At our focused inspection in November 2015 we found that there had been occasions when people had been supported during the night by staff who had not completed appropriate training. This was a breach of Regulation 18: Staffing, of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

After the focused inspection the registered manager removed two untrained individuals from providing care and provided us with confirmation of the actions they had taken to ensure people received care from staff who had completed appropriate training.

At our inspection in July 2016 we looked at the records of the training care staff had completed. We saw that all staff had completed training to give them the skills and knowledge to provide support as people required. The staff member on duty confirmed that they had completed training including in safe handling of medicines, supporting people living with dementia and moving and handling.

The registered manager was working in the home providing support to people. This gave her the opportunity to work with the member of care staff to provide guidance if required and to oversee the quality of care provided.

The registered manager was knowledgeable about the Mental Capacity Act (2005) (MCA) and her responsibilities around promoting people's rights. The 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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA. There was no one in the home had a DoLS authorised. We saw that there was no one who needed constant supervision to ensure

their safety. People chose where to spend their time, in the communal areas, their own rooms or the garden. Everyone we spoke with said they were asked for their agreement before the staff provided their support. They told us that they could refuse any part of their planned care if they wished. One person told us, "The girls [care staff] just do what I ask them." We saw that people made choices about their lives and their care and the decisions they made were respected.

People told us that they received meals that they enjoyed. One person said, "We have good meals." People had a choice of hot and cold drinks throughout our inspection. People told us that the care staff encouraged them to drink enough fluids to support their health and wellbeing. We also observed this.

We saw that meal times were pleasant and sociable occasions. People who wished to took their meals in the communal dining room. People could also choose to eat in the sitting room, the conservatory or in their own rooms if they preferred. We saw the dining table was nicely presented with cutlery, napkins and condiments that people may have wished to use. People were given a choice of drinks. One person had requested a glass of beer, another had a glass of wine and other people had cordial of their choice.

People who lived in the home and the visitors we spoke with told us that the registered manager and care staff were attentive to people's needs and "always" contacted the doctor if someone was unwell. People told us they were supported to see a range of health care services, as they required. People received the support they needed to maintain their health.



Is the service caring?

Our findings

People told us that all the staff who worked in the home were kind and caring. One person said, "The staff here are all lovely, very kind and patient." Another person said, "The staff are all very caring." A visitor to the home told us, "This is a very caring home."

We received many positive comments about the care provided in the home. These were reflected in "Thank you" cards and letters that had been sent to the registered manager. These showed that people valued the service and the care provided.

We saw that people who lived in the home and their visitors were comfortable and relaxed with the registered manager and the staff member on duty.

People told us, and we saw, that the staff knew individuals well. They knew the choices people had made about their lives and care and respected the decisions people made. We saw that people were treated as individuals and with kindness and respect. The staff knew the names people wished to be addressed by and used these consistently.

The registered manager spent time supporting people to make choices about their daily lives. One person wanted to sit in the garden, but was concerned if the weather was warm enough for them to enjoy this. The registered manager helped them to choose appropriate clothing to ensure they could enjoy the fresh air without being cold.

Everyone we spoke with told us that people were well cared for and well looked after. We saw that the staff member on duty and registered manager were patient and unhurried when supporting people. They treated people in a friendly and respectful way. The member of staff on duty and visitors we spoke with told us that this was "normal" in the home. One visitor told us, "It's always like this, very relaxed and [the registered manager] always makes time to chat with people." Other visitors we spoke with said, "This is a real 'home from home'" and told us, "It was a blessing finding this place, [relative] couldn't be happier."

The registered manager and care worker identified if people were anxious or disorientated and took prompt action to reassure individuals as they needed. One person had been out during the morning visiting the local area with a relative. When they returned to the home, the registered manager took time to sit with them and asked them about their morning. We saw that this helped them to feel less anxious about their relative leaving.

The registered manager and care worker gave people the time they needed to carry out tasks themselves. They offered guidance and assistance as people needed and supported people to maintain their independence.

People were asked for their views about their care and support. We saw that people were asked if they had enjoyed the activities they had followed during the morning and if they had enjoyed the midday meal.

The registered manager was knowledgeable of how to contact local advocacy services if an individual required support to express their views. Advocates are people who are not connected to the service and who can help people to make decisions about their lives or support people to express their wishes.	



Is the service responsive?

Our findings

People told us that this was a good service and said the support was responsive to their needs and choices about their lives.

We saw that one person had chosen to go out with a relative during the morning and was not in the home at the time the midday meal was usually served. The registered manager had arranged for their meal to be provided later, so they did not have to return to the home early or miss their meal. A visitor we spoke with told us that the service was always responsive to people's wishes. They said, "People seem to be able to eat any time. There is always a meal available."

People who lived in the home told us they had been included in planning and agreeing to the support they received. We also saw this. People were asked if they wanted support and this was provided as they preferred. We saw that each person was treated as an individual and made choices about all aspects of their daily lives. Visitors we spoke with told us that this was how people were always treated. One told us, "The staff and manager [registered manager] 'go that extra mile' for people, nothing is too much trouble."

Each person who lived in the home had a care plan that detailed the support they needed and how they wanted this to be provided. We saw that individuals and people who knew them well had been included in developing their care plans. The care plans included information about the person's life and interests. This gave the staff in the home information about what was important to the person. The care plans were written in a respectful and positive way. They included information about the tasks people were able to carry out themselves as well as the support they required.

Support was provided in a very individualised and person centred way. The registered manager and care worker knew people well and supported them in a way that took account of their preferences. People followed activities they chose and meal portions were varied, taking account of each person's choice. We also saw that people chose where to spend their time and to have their meals.

Activities were provided and planned to take account of individual's choices and interests. One person had attended a music concert with the registered manager, because this was an activity they enjoyed. Two people had helped the registered manager and gardener in working in the garden. People also told us of visits they had enjoyed in the local area. The registered manager supported people to follow activities and interests that they had enjoyed before moving to the home.

One person had brought their pet to live with them in the home. They told us that the staff supported them, as they needed, in looking after their pet. We saw that it was important to the individual to be able to have their pet with them.

All of the visitors we spoke with told us that they were always made to feel welcome when they visited the home. They told us that they could visit at any time they chose and said, "There's always a welcome and an offer of a drink." People were able to see their visitors as they wished. This helped to ensure they could

maintain relationships that were important to them.

The registered manager had a procedure for receiving and managing complaints about the service provided. People who lived in the home and the visitors we spoke with told us that they had never had to make a formal complaint. One visitor told us, "If we had any concerns, however small, we'd speak to [the registered manager]." People told us that they were confident the registered manager wanted to provide a high quality service and listened to their views.



Is the service well-led?

Our findings

People who lived in the home and all of the visitors we spoke with told us that the home was well managed. Everyone we spoke with told us that they knew the registered manager well and were confident to speak with her if they had any concerns. One person told us, "[The registered manager] is lovely, very kind and easy to talk to." A visitor to the home told us, "This is a fabulous place, you couldn't ask for better, [the registered manager] is terrific, she really wants to provide an excellent service and she does."

We saw that people who lived in the home and their visitors were very comfortable speaking to the registered manager. She worked alongside the care staff and was available for people to speak with as they needed. Some people in the home were living with dementia and required support to express their views. We saw that the registered manager was kind and patient and gave people time and support to share their views and wishes. People told us they were confident the registered manager would take action in response to their comments or suggestions.

The registered manager gathered people's views in formal and informal ways. She asked people for their views as she worked in the home and also held regular meetings where people could share their experience of life in the home and make any suggestions. We saw that the meals provided and planned activities had been discussed at meetings and people's suggestions had been acted on. People who lived at the home were included in planning how the service was provided.

We saw that the atmosphere in the home was relaxed and inclusive. The registered manager was committed to providing a high quality service. The staff member and visitors we spoke with said they felt the registered manager set high standards and ensured these were maintained.

At our last inspection of the home in November 2015 we found breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At that inspection we shared our concerns with the registered manager of the home. Following that inspection the registered manager took immediate action to ensure the safety of people in the home and to improve the quality of the service provided. This showed that she was responsive to feedback and took prompt action to protect people who lived in the home. At this comprehensive inspection in July 2016 we found the improvements had been sustained and people were provided with safe care that met their needs and respected their rights.

The registered manager was continuing to improve the service provided. We saw improvements to communal areas and to the gardens. The registered manager also carried out regular checks on the building and equipment in the home to ensure people's safety. These helped to ensure people had a safe and pleasant environment to live in.

During our inspection we looked at a range of records including care plans, staff records and premises safety check records. All the records we looked at were well organised and regularly updated. This meant the registered manager and staff in the home were able to find important information promptly.

Providers of health and social care services are required by law to inform the Care Quality Commission, (the CQC), of important events that happen in their services. The registered manager had notified us of significant events as required. This meant we could check that appropriate action had been taken.