

Norton Care Limited

The Grange Nursing Home

Inspection report

Watershaugh Road
Warkworth
Morpeth
Northumberland
NE65 0TX

Tel: 01665711152

Website: www.thegrangewarkworth.co.uk

Date of inspection visit:
05 March 2021

Date of publication:
22 April 2021

Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

The Grange Nursing Home provides nursing and residential care for up to 23 older people, some of whom have a dementia related condition. There were 21 people living at the home at the time of our inspection.

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

We identified shortfalls with infection control. Government guidance in relation to the safe use of PPE was not always followed. In addition, some areas of paintwork, flooring and furniture were not intact and therefore difficult to keep clean.

A system was in place to assess and monitor infection control which had been updated and amended in response to the COVID-19 pandemic. However, the systems and procedures in place were not always followed by staff. We have made a recommendation about this.

Safeguarding and whistleblowing procedures were in place. However, several staff raised concerns of a safeguarding nature, some of which were historical. We referred these to the local authority safeguarding team and notified the registered manager and provider. We have recommended that the provider revisits safeguarding and whistleblowing procedures with staff, so the correct procedures are followed and any concerns are reported in a timely manner.

Processes were in place to involve people and staff in the running of the home. Some staff said the registered manager was, "Too nice." They explained that on occasions, certain issues which they raised, were not fully resolved, because staff said she did not like to cause offence. We discussed this feedback with the registered manager and they explained that all issues raised with them were investigated and addressed.

Staff said that the culture at the home was not always positive and staff did not always work together effectively as a team. We have recommended that the provider keeps the day-to-day culture under review to ensure action is taken if any concerns are raised. The registered manager and provider were aware of the cultural issues at the home and action was being taken to address these.

There were enough staff deployed to meet people's needs. Medicines were managed safely.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was Good (published 12 March 2020)

Why we inspected

We received concerns in relation to people's care and treatment, infection control and the environment. As a

result, we undertook a focused inspection to review the key questions of safe and well-led.

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 coronavirus and other infection outbreaks effectively.

The overall rating for the service has changed from good to requires improvement. This is based on the findings at this inspection.

We have found evidence that the provider needs to make improvement. Please see the safe and well led key sections of this full report.

You can see what action we have asked the provider to take at the end of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Grange Nursing Home on our website at www.cqc.org.uk.

Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so

We identified one breach of the regulations relating to safe care and treatment. Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

Follow up

We will work alongside the provider and local authority to monitor progress. We will 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 not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

The Grange Nursing 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.

Inspection team

The inspection was undertaken by one inspector.

Service and service type

The Grange Nursing Home 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

The inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. We used all of this information to plan our inspection.

During the inspection

We spoke with 10 members of staff including the registered manager, nurse, care staff, the office manager, housekeeping staff, the activities coordinator and the maintenance man. We also spoke with two people. We reviewed one person's care records and records relating to medicines and maintenance. The registered manager was not at the home on the day of the inspection, we communicated with them by telephone.

After the inspection

We spoke with the nominated individual and sought clarification from the registered manager to validate evidence found. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of records relating to the management of the service which were sent to us electronically.



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 good. At this inspection this key question has now deteriorated to requires improvement. This meant some aspects of the service were not always safe. There was an increased risk that people could be harmed.

Preventing and controlling infection; Assessing risk, safety monitoring and management

- Government guidance relating to safe working practices regarding infection control, including the safe use of PPE was not always followed by staff.
- Equipment and materials were not always used and stored appropriately to ensure effective infection control. Some areas of paintwork, flooring and furniture were not intact and therefore difficult to keep clean.

The above shortfalls were a breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following our inspection, the registered manager took action to address the concerns we identified.

- Checks and tests relating to the premises and equipment were carried out to make sure they were safe. Risks relating to people such as moving and handling, malnutrition and skin damage were assessed and documented.

Systems and processes to safeguard people from the risk of abuse

- Safeguarding and whistleblowing procedures were in place. However, several staff raised concerns of a safeguarding nature, some of which were historical. We referred these to the local authority safeguarding team and notified the registered manager and provider.

We recommend the provider revisits safeguarding and whistleblowing procedures with staff, so the correct procedures are followed, and any concerns are reported in a timely manner.

Learning lessons when things go wrong

- Accidents and incidents were analysed and monitored so action could be taken if any trends or themes were identified.

Using medicines safely

- Medicines were managed safely. Records were maintained to show that medicines were administered as prescribed.

Staffing and recruitment

- People's needs were met by the number of staff on duty.
- A safe recruitment system was in place.

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 good. At this inspection this key question has deteriorated to requires improvement. This meant the service management and leadership was inconsistent.

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

- A system was in place to assess and monitor infection control which had been updated and amended in response to the COVID-19 pandemic. However, the systems and procedures in place were not always followed by staff.

We recommend the provider continues to review the IPC system at the home to ensure best practice guidance is followed and embedded into practice.

Following our inspection, the registered manager told us that they had addressed the concerns we had raised.

- Audits and checks on all aspects of the home were carried out to monitor the quality of the service.

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

- Some staff said that the culture at the home was not always positive and staff did not always work together effectively as a team. Although there was no evidence that the culture amongst staff had affected people's wellbeing; people living with dementia are sensitive to the interactions between staff and the social environment in which they live.

We recommend that the provider keeps the day-to-day culture under review to ensure action is taken if any concerns are raised.

The registered manager and provider were aware of the cultural issues at the home and action was being taken to address these.

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 registered manager understood their responsibilities in relation to the duty of candour.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Processes were in place to involve people and staff in the running of the home.

- Some staff said the registered manager was, "Too nice." They explained that on occasions, certain issues which they raised, were not fully resolved, because staff said she did not like to cause offence. We discussed this feedback with the registered manager and they explained that all issues raised with them were investigated and addressed.

Working in partnership with others

- The service worked with other organisations and stakeholders such as the local authority and health and social care professionals to make sure people received joined up care.

This section is primarily information for the provider

Enforcement actions

The table below shows where regulations were not being met and we have taken enforcement action.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment
Treatment of disease, disorder or injury	Government guidance relating to safe working practices regarding infection control, including the safe use of PPE was not always followed by staff. Equipment and materials were not always used and stored appropriately to ensure effective infection control. Some areas of paintwork, flooring and furniture were not intact and therefore difficult to keep clean. Regulation 12 (1)(2)(a)(b)(d)(e)(h).

The enforcement action we took:

We took enforcement action and imposed conditions relating to infection, prevention and control upon the provider's registration.