

Grazebrook Homes Limited Grazebrook Homes - 39 Adshead Road

Inspection report

39 Adshead Road Dudley West Midlands DY2 8ST

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Ratings

Overall rating for this service

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Date of inspection visit: 31 May 2022

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Good ●

Summary of findings

Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

Grazebrook Homes - 39 Adshead Road is a care home providing personal care to six people at the time of the inspection. The service can support up to nine people.

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

Right Support

Staff supported people to have the maximum possible choice, control and independence so they had control over their own lives. Staff focused on people's strengths and promoted what they could do, so people had a fulfilling and meaningful everyday life. The service gave people care and support in a safe, clean, well equipped, well-furnished and well-maintained environment that met their sensory and physical needs. The service made reasonable adjustments for people so they could be fully involved in discussions about how they received support, including support to travel wherever they needed to go. Staff supported people with their medicines in a way that promoted their independence and achieved the best possible health outcome.

Right Care

Staff promoted equality and diversity in their support for people. They understood people's cultural needs and provided culturally appropriate care. The service had enough appropriately skilled staff to meet people's needs and keep them safe. People's care, treatment and support plans reflected their range of needs and this promoted their wellbeing and enjoyment of life. People received care that supported their needs and aspirations, was focused on their quality of life, and followed best practice. Staff and people cooperated to assess risks people might face. Where appropriate, staff encouraged and enabled people to take positive risks.

Right culture

People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the management and staff. People were supported by staff who understood best practice in relation to the wide range of strengths, impairments or sensitivities people with a learning disability and autistic people may have. This meant people received compassionate and empowering care that was tailored to their needs. Staff placed people's wishes, needs and rights at the heart of everything they did.

Rating at last inspection and update

The last rating for this service was requires improvement (published 05 February 2020) and there was a

breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this inspection to assess that the service is applying the principles of Right support right care right culture.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Grazebrook Homes - 39 Adshead Road on our website at www.cqc.org.uk.

Follow up

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led	Good •



Grazebrook Homes - 39 Adshead Road

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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

One inspector carried out the inspection.

Service and service type

Grazebrook Homes - 39 Adshead Road 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 local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us annually 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 and three relatives about their experience of the care provided. We spoke with five members of staff including the nominated individual, registered manager and deputy manager. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also spoke with a healthcare professional who regularly visited the service.

We reviewed a range of records. This included two people's care records and six medication 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 Requires Improvement. At this inspection this key question has improved to Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. One person told us, "I have been here a long time, I feel very safe here because they [staff and registered manager] care about me." A relative said, "I get a good feeling about the staff, they are very good and lovely, they know [person] well. I've never seen [person] unhappy."
- Staff had training on how to recognise and report abuse and they knew how to apply it. A staff member said, "We have yearly refresher training. If I saw any signs or any level of abuse, I would record this and report this to the manager immediately. I feel supported to speak up and say if something is not right."
- People and those who mattered to them had safeguarding information in a form they could use, and they knew how and when to raise a safeguarding concern. A relative said, "I know who to complain to but [staff] are amazing and I have no need to complain about anything."

Assessing risk, safety monitoring and management

- People were involved in managing risks to themselves and in taking decisions about how to keep safe. One person said, "I am very involved, the manager and I speak every day. I go out on my own and go visit my friends, I just tell the staff where I'm going so they know."
- People's care records helped them get the support they needed because it was easy for staff to access and keep high quality care records. Staff kept accurate, complete, legible and up-to-date records, and stored them securely. We found records regarding risk were person-centred and detailed. A staff member said, "[Risk assessments] give us all the information needed and they are up to date. We know the risk to people well."
- The registered manager helped keep people safe through formal and informal sharing of information about risks. A detailed handover record was maintained to share live information regarding the events of each shift and the current risks to people.
- 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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

• We found the service was working within the principles of the MCA and if needed, appropriate legal

authorisations were in place to deprive a person of their liberty.

Staffing and recruitment

• The service had enough staff, including for one-to-one support for people to take part in activities and visits, how and when they wanted. A person said, "They have plenty of staff here." A relative said, "They have lots of staff."

• The numbers and skills of staff matched the needs of people using the service. There were sufficient numbers of staff with the skills and knowledge to meet people's needs.

• Staff recruitment and induction training processes promoted safety, including those for agency staff. The provider continued to recruit staff safely through the requirement of references and application to the Disclosure and Barring Service (DBS). A DBS check enables a potential employer to assess a staff member's criminal history to ensure they were suitable for employment. A staff member said, "I had a DBS check then provided references and proof of identity as expected. I had an induction when I started, It was really good I was introduced to everyone and had lots of training and shadowing to get to know the residents and meet them."

Using medicines safely

• The registered manager and staff understood and implemented the principles of STOMP (stopping overmedication of people with a learning disability, autism or both) and ensured that people's medicines were reviewed by prescribers in line with these principles. People's records showed medicines were regularly reviewed and people received 'as and when required' medicines only when they were required.

• People were supported by staff who followed systems and processes to prescribe, administer, record and store medicines safely. The registered manager had clear systems in place and staff received training and checks on their competency. One staff member said, "We have competency checks and spot checks to make sure we know what we are doing and that we are always doing it as trained."

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.

• We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.

• We were assured that the provider's infection prevention and control policy was up to date. Visiting in care homes

• There was a clear visiting procedure which facilitated people having visits from friends and family in their rooms. Visitors completed Lateral Flow Tests (LFT) and had their temperatures taken. Visitors were provided with PPE in line with government guidance before their visit began.

Learning lessons when things go wrong

- The service managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately and managers investigated incidents and shared lessons learned.
- Staff raised concerns and recorded incidents and near misses and this helped keep people safe.
- The registered manager analysed the records of incidents for trends and patterns both monthly and annually; then shared this information with staff.

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 Requires Improvement. At this inspection this key question has improved to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Our last inspection found systems and processes were not enough to demonstrate safety was effectively managed. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

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

- Our last inspection found audits in place had failed to identify a number of areas for improvement. This inspection found audits were robust and where they identified shortfalls which were planned and actioned timely. For example, the registered manager's infection control audit identified where action was needed, and this had been completed.
- During our last inspection we found the systems in place to ensure staff were recruited safely had not been effective. This inspection found the provider's recruitment processes had been improved and the procedures were robust to ensure staff were recruited safely.
- Staff were able to explain their role in respect of individual people without having to refer to documentation. A staff member told us, "We have time with the residents, and we know them really well; like their likes and dislikes as well as their behaviours and risks."
- Staff delivered good quality support consistently. One person said, "The staff are great they look after me well and if I need anything, they help me. They [staff] are always kind and they look after people well. They are good at their jobs."

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

- The provider and registered manager worked hard to instil a culture of care in which staff truly valued and promoted people's individuality, protected their rights and enabled them to develop and flourish. A staff member said, "They [managers] are very approachable and the staff are very much included. People are put first, and they are the main focus." A relative told us, "I would recommend them to anyone."
- Staff felt respected, supported and valued by senior staff which supported a positive and improvementdriven culture. A staff member said, "They [managers] are very visible and we can contact them out of hours as well." Another staff member said, "The morale is lovely we all get on and the staff team are supportive of each other."

• Management and staff put people's needs and wishes at the heart of everything they did. A staff member told us, "People have an input in all decisions. For example, people said in their meeting they wanted to see live animals, so the safari park trip was booked."

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 duty of candour places a legal responsibility on organisations to act in an open and honest way when things go wrong. The manager and nominated individual were open and transparent, being fully receptive to feedback throughout the inspection process.
- The manager and nominated individual understood their responsibility to apologise to people when things went wrong.
- The rating from our last inspection was displayed, and the manager understood their responsibility and when to submit statutory notifications to CQC.

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

• People, and those important to them, worked with managers and staff to develop and improve the service. One person said, "The manager and I speak every day and [registered manager] is very supportive." A relative said, "[Registered Manager] and the staff are regularly in contact. They phone and ask any questions and for my views."

- The provider sought feedback from people and those important to them through questionnaires and meetings; they used the feedback to develop the service. Questionnaires were completed by people and staff regularly, and the feedback was overwhelmingly positive from both. A staff member said, "We have resident meetings monthly and then we speak to the managers in our meetings about the outcomes and they then make sure it happens."
- Regular staff meetings and supervisions were held where staff were updated on developments and received feedback. Staff were encouraged to be involved in the development of service delivery. A staff member said, "We have meetings and supervisions regularly where we are able to input into the service. The managers are very person centred and they keep the records up to date and they involve other professionals such as SALT when things change for people."

Continuous learning and improving care

• The provider invested sufficiently in the service, embracing change and delivering improvements.

• The registered manager had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible. The registered manager had developed and implemented an action plan since our last inspection and was continuing to develop and improve areas of their systems and oversight.

Working in partnership with others

• The manager and staff worked well in partnership with other professionals which helped to give people using the service a voice and maintain their wellbeing and ensure they received the care they needed. A professional said, "The staff are brilliant they support people well. The mangers are great and very professional, they are always prepared."