

Underley Educational Services

Grange View

Inspection report

Park Road
Grange over Sands
Cumbria
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Grange View is a residential care home providing accommodation and personal care for up to seven younger adults with lifelong complex needs associated with learning disabilities and autism. At the time of the inspection the home was fully occupied. The service had been developed and designed taking into account best practice guidance and the principles and values underpinning Registering the Right Support. Staff were highly skilled in supporting people to lead as independently as possible and meaningful lives of their choosing. The service was focused on providing a smooth and meaningful transition for people moving on from children's services into adult life.

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

The service applied the principles and values consistently of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence. The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. Since the last inspection people's life opportunities and quality of life had greatly improved. This was because of the service's commitment in ensuring each person had an individualised support plan designed with support from the provider's in-house healthcare professionals.

There were enough numbers of suitably qualified staff to meet people's individual needs. Risks to people's well being and safety had been identified and well managed. Where safeguarding concerns or incidents had occurred, these had been reported to the appropriate local authorities. Medicines were managed safely, and staff gave people the right level of support they needed to take their medicines. When employing people, the provider had completed checks to ensure they were suitable to work with vulnerable people.

Staff training and development was on going and they had received specific training to safely support and care for people with complex needs. Staff were regularly supported by the registered manager and their deputy through staff meetings, supervision and appraisals. Where relevant people were fully involved in meal preparations and their nutritional needs were met. People and their families had been fully involved in consenting to the care and support provided. The in-house health professionals, who supported the staff team, worked closely with a variety of external agencies and other health professionals to provide exceptionally detailed support plans to meet people's physical and emotional needs and to achieve their goals.

Staff respected and valued people as individuals and treated them with respect and made sure their privacy

and dignity were maintained. People were fully supported to be in control of their lives and be as independent as possible. People had developed trusting and positive relationships with the staff team. Staff were skilled in the communication needs of people and the in-house professionals used nationally recognised assessment tools to establish people's abilities, needs and choices. People were empowered in setting their own goals and aspirations. This resulted in people achieving positive and life changing outcomes, including one person planning their move from the home to live in the community.

People were supported to have a very active part in the local community and were encouraged to make friendships outside of the home. With enabling support from staff some people were engaged in paid employment, work placements, college courses, volunteer work and socialised in the local community. Staff were focused on people having as many opportunities as possible for them to gain new skills and become more independent. People knew how they could raise concerns about the service provided.

The provider had employed a new registered manager since we last inspected and jointly they regularly monitored the quality and safety of the service. Governance and quality assurance were well-embedded within the service. The leadership of the service promoted a positive, open culture. The registered manager and staff team worked closely with other agencies and healthcare professionals to make sure people had excellent care. Feedback recently gathered by the provider highlighted that 100% of external professionals and relatives, when asked felt the service was well-led.

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 13 September 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?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Grange View

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.

Service and service type

Grange View 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 who had been appointed since we last inspected. 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 the 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. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make.

We used all of this information to plan our inspection.

During the inspection-

We looked around the home, reviewed records relevant to the running and quality monitoring of the service, the recruitment records for all new staff employed since the last inspection and policies and procedures. We looked at training and supervision records. We looked at three care records and records of medication administration, medicines storage and management.

We spoke briefly with four people living at Grange View and two people offered to show us their bedrooms and expressed they were very happy living at Grange View. We observed people's daily routines and staff interaction. We spoke with three staff members on duty, including the registered and deputy managers and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at training data and quality assurance records. We also contacted three external health and social care professionals and two relatives for their views on the service provided.

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

- People were safe and protected from abuse. Staff understood their responsibilities around protecting people from abuse. We saw, where necessary, appropriate referrals had been made to the local authority safeguarding team.
- People said they thought the service was safe. In a recent survey by the provider all of the young adults living at Grange View said they were listened to by staff and they felt safe. One relative said, "It absolutely is a safe place."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The staff had identified and managed risks to people's safety. Any potential risks were recorded in the care plans and gave guidance to staff about the actions to take to ensure the safety of people they were supporting.
- The registered and deputy managers reviewed all incidents to ensure appropriate actions were taken. Risks were reassessed to prevent reoccurrence and where lessons had been learned these were shared throughout the staff team.

Staffing and recruitment

- The provider had recruited staff in a safe manner and completed the necessary checks of suitability to work with vulnerable people.
- The registered manager continually assessed staffing levels to ensure there were enough staff available to flexibly support people.

Using medicines safely

- People received their medicines when they should and as they had been prescribed. Suitable and safe arrangements were in place for people who wished to administer their own medicines.
- The provider had audit systems in place to check people had received their medicines safely. Staff who administered medicines had undertaken appropriate training.

Preventing and controlling infection

- The home was very clean and there was ongoing maintenance. Staff had received training on infection control and understood their responsibilities.

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

- The staff along with the in-house occupational therapist completed a comprehensive assessment to ensure people's needs could be met and a plan of care developed. Nationally recognised tools were used to establish people's abilities in achieving and performing skills in everyday life.
- We saw evidence the service was referencing current legislation, standards and best practice to achieve effective outcomes. This included the employment of in-house professionals such as, an occupational therapist, learning disability nurse and a speech and language therapist.
- Care plans continued to be regularly reviewed and updated where required. Records we looked at confirmed this.

Staff support: induction, training, skills and experience

- Staff were competent and carried out their roles effectively. People told us they felt staff were extremely knowledgeable about all people's care needs. One relative told us, "Staff are exceptional in applying their knowledge and skills." Another person told us, "Since the change in manager the staff had done so much more training."
- Staff confirmed they had received training that was relevant to their role and enhanced their skills.
- Staff told us they felt very supported by the registered manager and they had received regular supervision and appraisal of their work.

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

- Staff supported people in managing their health and wellbeing needs by making appropriate referrals to external services. Some people were also encouraged in managing their own health needs and health appointments.
- Staff worked effectively with external healthcare professionals to ensure people's healthcare needs were met.

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

- People's nutritional needs were met. People were encouraged and supported to plan their own menus, shop for food items and cook regularly.
- People could choose when and where to eat, and the dining room was seen to be used as a social hub in the home. Dietary needs had been assessed and where necessary staff support was provided to ensure these were met.

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

- Accommodation was accessible, safe, homely and suitable for people's needs. Décor and furnishing had been chosen by people living there and bedrooms were very personalised.
- A new sensory bathroom was being designed and the provider had plans in place to install it.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and we found they were being met.

- Staff were knowledgeable about their responsibilities under the MCA and people's rights were protected. The registered manager had made DoLS applications when required and where relevant.
- People and their relatives had been involved, consulted with and had agreed with the level of care and treatment provided. Consent to care and treatment in the care records had been signed by people with the appropriate legal authority to do so.
- The staff knew people well and gave them the time they needed to make decisions about their care. The staff were patient and respectful and supported people to make choices about their daily lives.

Is the service caring?

Our findings

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

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

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

- People received exceptional care and support from staff who were extremely compassionate and caring. All the staff we met were passionate about doing whatever they could to support people to achieve and get the most out of life. A relative told us, "The care is exemplary. All the staff are completely dedicated and devoted. They make everyone feel like they are family."
- Staff had a good understanding and training in protecting and respecting people's human rights. Staff recognised and understood everyone's uniqueness and demonstrated an awareness about promoting people's self-esteem.
- People were supported with relationships that were important to them. Staff went to considerable lengths to communicate with, and to ensure people had regular contact with family and friends. One relative told us, "The new manager has made so many positive changes." And told us the nominated individual had been, "Very instrumental in ensuring my [relative] is getting the right level of service for their needs."
- People were given positive reinforcement to reach goals and help build self-worth. Staff gave careful consideration and thought to planning daily activities and to ensuring that these were a success. For example, the introduction of an indoor sports club based on individual's choice of sporting activities and encouraging all people to take part. This had a positive impact and people were having more meaningful interactions and had developed a healthy competitiveness. This had produced a great sense of achievement and teamwork between staff and everyone in the home.

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

- Staff were passionate about giving people a voice and making them central to the running of the home. Effective communication with people had become a key feature of the service with a range of creative ways used to enhance people's ability to be understood and to communicate, both verbally and non-verbally.
- People were included in all decisions about their care and the staff respected the choices people made. We saw people were able to choose where to spend their time and if they wanted to be on their own or with other people. Care records showed care planning was centred on people's individual needs and preferences. Staff reviewed people's needs regularly including consultation with relatives and any professionals involved.
- People were sometimes supported to express their views by their families. The registered manager arranged advocacy services if they were needed. Advocacy services help people to access information and services, be involved in decisions about their lives, explore choices and promote their rights.
- People identified in the last providers quality survey that staff helped them to prepare for their future and their views and preferences were 100% taken into account.

Respecting and promoting people's privacy, dignity and independence

- Promoting people's independence and autonomy was important once people had transitioned smoothly into adult services. Staff were very aware of the importance of building self-esteem and demonstrated this in the way they interacted with people every day. There was a clear desire to see people succeed and achieve goals. Goal setting was carefully considered and developed with each person so that the goals were achievable. One person's journey since living at Grange View had seen them progress from being very reserved and demonstrating defensive behaviours to them completing further education, gaining employment skills, travelling independently, managing finances, medications. They had made such exceptional progress with independent living skills that they were working with commissioners to move out of residential care and into the community. One relative told us, "Since being at Grange View my [relative] has flourished and matured. I am overwhelmed with how well they have done."
- People were supported and encouraged by staff to respect themselves and other people. This included working with people to know the importance of respecting each other's private space. Staff helped people with relationships and to understand the impact of their behaviour on other people. This also allowed them to understand how they should be treated. One person lived as independent life as they could at Grange View. They had their own keys to come and go as they pleased and enjoy independent access to the local community and leisure. They had gained paid employment and volunteered in the local community, managed their own daily living and health needs and had fulfilled goals they had set for themselves.
- The relationships between staff and people who received support consistently demonstrated a high regard for people's dignity and respect.

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 remained the same. This meant people's needs were met through good organisation and delivery.

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

- People's needs had been thoroughly assessed and staff supporting them had a good understanding of their personal preferences. This enabled them to provide personalised care tailored to the needs and wishes of the individual.
- There was a very positive person-centred culture in the home, created by a highly motivated and skilled staff team. We saw consistency and continuity of care provided by the staff team had a major impact on people's quality of life. Care plans had goals and outcomes tailored to people's needs and level of ability to clearly show their personal progress.
- Staff communicated with relevant others regularly and involved them in the care and support plans, to express their views and make choices about the care delivered.

Meeting people's communication needs

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

- Staff had identified how people needed information to be provided and people's communication preferences and needs were detailed in their care records. The staff team had taken on extra training and were developing their skills in sign language.
- Staff gave people time to understand information and supported them to do so. Pictorial information was also used as an alternative to written and /or verbal information.

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

- People had active and productive roles in the local community, and we saw that this was important to them and gave them a feeling of self-worth. For example, one person had paid employment in a local shop and also helped voluntarily in a local charity shop.
- Relatives we spoke with told us they could visit when they wanted, and they were made very welcome in the home.
- Staff were flexibly available to support people in accessing activities of their choice. The in-house occupational therapist used nationally recognised tools to assess people's capabilities and tailored specific activities to ensure that everyone living at Grange View had meaningful activities. They also used assessments tools to measure how effective participation was in developing individual's skills and their enjoyment.

Improving care quality in response to complaints or concerns

- The provider had a procedure for receiving and responding to complaints about the service. No one we spoke with raised any new concerns or complaints. People told us they would speak to the staff or registered manager if they had any complaints.
- The registered and deputy managers used any learning from incidents and shared it with staff during regular meetings.

End of life care and support

- No one was receiving end of life support at the time of the inspection. However, people were supported with loss and the bereavement processes when needed. Staff understood the importance of supporting people's emotional and spiritual wellbeing, in line with expressing their personal end of life wishes

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.

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

- Staff consistently placed people at the heart of the service, understood the importance of maintaining an inclusive culture and a belief in getting the best from people.
- The culture within the home was an attitude of 'we can do this' amongst people and staff in supporting people to achieve their goals. This had led to some life changing outcomes for people, with a significant impact on their independence.
- Staff said they felt valued and appreciated and supported to develop in their work, staff morale was good. We were told, "It's happy place to work" and "It's all about team work." A relative said, "It's an exceptional home and without a doubt managed well."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Continuous learning and improving care

- The registered manager understood their responsibilities under the duty of candour. We had been notified of significant events which had occurred in the home. The notifications showed appropriate actions had been taken in response to incidents, including sharing information with appropriate other authorities when incidents had occurred.
- The registered and deputy managers regularly monitored and reviewed any accidents and incidents to identify any patterns that needed to be addressed or lessons to be learned.

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

- The provider and registered manager used quality assurance systems to ensure safety, quality and improvement of the service were consistently monitored.
- The registered manager was experienced, and staff were knowledgeable about the needs of the people they supported. We found the service was well-organised, with clear lines of responsibility and accountability.

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

- Staff consistently worked in partnership with the wider professional team to ensure people received the care they required and if their needs changed. Where specialist services were involved in providing people's support, the advice they had given had been included in people's care plans.

- Relatives told us they had been involved in regular reviews of people's care needs and received regular information about the service.
- Staff worked effectively in partnership with health care professionals from multidisciplinary teams. The provider had invested and employed their own key professionals, an occupational therapist, learning disabilities nurse and a speech and language therapist, to support the staff team in coordinating partnership working to achieve exceptional outcomes for people in improving their life skills, confidence and independence.