

Greystone House Residential Care Home Limited

Greystone House Residential Care Home

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Greystone House Residential Care Home is a residential care home providing personal care to people living with mental health conditions. The home was full, with 23 people living there at the time of the inspection.

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

People told us they felt safe and were comfortable living at the home.

A range of checks were in place to monitor the safety of the home and equipment.

There were enough suitably recruited staff in place to support people.

Positive risks were taken to enable people to access the community. Some people were encouraged to manage part of their medicines with staff support. Medicines were safely managed. We made some suggestions to enhance medicines procedures, which was acted on immediately.

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.

Care and support plans reflected people's needs and how staff should support them. Quality assurance systems were in place and after feedback these were updated to further develop processes.

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 10 May 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.

Please see the Safe and Well-led sections of this full report. 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 remained Good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Greystone House Residential Care Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 ●

The service was well-led.

Details are in our well-led findings below.

Greystone House Residential Care 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 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

The inspection team consisted of 2 inspectors and a newly appointed inspector who was shadowing the inspection as part of their induction.

Service and service type

Greystone House Residential Care Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Greystone House Residential Care Home is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed the information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return (PIR). 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.

We contacted the local authority, fire service, social workers, community mental health teams and Healthwatch to request feedback about the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

During the inspection

We spoke with 9 people who used the service about their experience of the care provided. We contacted 4 relatives to gain their feedback on the care provided to their loved one.

We spoke with the provider/registered manager and the second registered manager. We gained feedback from 10 members of care and support staff. We contacted the district nurse teams, the local GP, and a further 3 social workers.

We reviewed recruitment records for 4 staff and a range of records relating to the management of the service, including audits, risk assessments, and policies. We also reviewed care plans of 8 people who lived at the home.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems and processes were in place to safeguard people from abuse. People felt safe. One person said, "Yes I am (safe). The staff are very kind to me." A relative said, "She's safe and well cared for. She's really happy and treated well. Looked after well and very content. I couldn't ask for more."
- Staff had received training in safeguarding adults and told us they would have no hesitation in reporting any concerns they had.

Assessing risk, safety monitoring and management

- Risk assessments were in place to help staff support people safely.
- The service promoted positive risk taking to maximise people's independence. This included ensuring people had access to the local community.
- The home was well maintained with regular checks of the premises and equipment in place. An updated fire risk assessment was taking place after a new fire system had been installed.

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)

- The service was working within the principles of the MCA and when required, appropriate legal authorisations were in place to deprive a person of their liberty.
- Staff had received suitable training to help ensure they understood capacity and consent. Policies and procedures were in place to support this.

Staffing and recruitment

- There were enough staff to support people. One relative said, "The staff approach is wonderful and there's continuity of staff which is so important. I think there's enough staff, there's always someone there if needed."
- Safe recruitment checks were in place which ensured suitable candidates were employed. This included 2 references and Disclosure and Barring Service (DBS) checks. DBS checks provide information which help

employers make safer recruitment decisions.

Using medicines safely

- Medicines management was safe. We suggested some improvements to enhance current procedures, and these were put in place immediately.
- Staff supported some people to self-medicate where possible and promote their independence.
- Medicines were stored securely and disposed of safely.
- The competency of staff administering medicines was regularly reviewed.

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 supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were somewhat assured that the provider was using PPE effectively and safely. We made suggestions which were immediately acted upon, including the improved use of PPE in kitchen areas.
- We were assured that the provider was responding effectively to risks and signs of infection.
- 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 arrangements were in line with current government guidance.

Learning lessons when things go wrong

- Lessons were learnt when things went wrong. Incidents were recorded and the themes shared with staff to try and avoid a repeat of the situation. From a complex incident which occurred earlier in the year, one healthcare professional said, "I don't think they [staff at service] could have done any more."
- Care plans reflected changes to people's care when incidents had occurred, including updated risk assessments.

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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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

- A positive culture was promoted in the home. One person told us, "It's a good place to live. Have some friends and able to do what I want. They try and help me as much as they can. That's all you want really."
- There was a person-centred ethos and staff empowered people to lead as fuller life as possible. One staff member said, "
- People were confident in the management and staff teams. One person said, "All very kind to me. They get things from the shops for me and keep me right."

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 responsibility in relation to the duty of candour, including being honest and apologising when things went wrong.

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

- The staff and management team understood their roles and were clear on their responsibilities.
- Quality checks and audits were carried out to monitor the level of service provided. These were updated after feedback to further enhance procedures.
- The registered manager ensured any legally reportable events had been notified to the CQC.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Surveys had taken place to gather people's views of the service being provided. The provider was extending surveys to include staff and professionals. One relative said, "Surveys are sent out for feedback, and we get the results about what's been said and what improvements they are going to make as a result of comments and feedback."
- Meetings had taken place to ensure people and staff were involved in decision making within the home. Ways to improve the service were discussed, including in connection with mealtime experiences and other enhancements to the home. One staff member said, "Residents meetings are held before the staff meetings, so if there's feedback, we hear it and can talk about anything we need to do differently. We get minutes as well in case we've missed anything."
- The service continually learnt and improved care. Lessons had been learnt from one complex situation

arising with one person. The service continued to work to enhance their work with others wrap around services, including community mental health and the crisis team.

Working in partnership with others

- Staff had good working relationships with other health care professionals and local services. All feedback received was of a positive nature. One healthcare professional said, "The staff are caring and would do anything for residents." Another said, "Amazing service and staff."