

Marton Care Homes Ltd

Dene Grange Care Home

Inspection report

Dene Road
Hexham
Northumberland
NE46 1HW

Tel: 01434603357

Date of inspection visit:
07 March 2023

Date of publication:
20 March 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Dene Grange Care Home is a residential care home providing personal and nursing care to up to 50 people, some of whom live with dementia. At the time of our inspection 30 people were using the service, living in three units within the home. One unit was not currently being used.

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

Improvements following our last inspection had been made. Risks had been identified and regularly reviewed.

People felt safe and medicines were managed well. People and their relatives said staff were kind and looked after them very well.

The home was well-led, and the registered manager had improved governance and quality assurance systems. Lessons were learnt when things went wrong.

The home was still in the process of refurbishment, but this was expected to be completed in the next few months. The home and surrounding gardens had been made safe and ongoing monitoring took place.

There were enough staff to meet people's needs, although there was a lack of domestic staff and the registered manager had already gained agreement for domestic staff to be increased. Staff were recruited safely and were inducted into the service and received suitable ongoing training.

The home was clean and tidy, although due to a lack of domestic staff, touch points were not cleaned as often as they should have been. There were some inconsistencies with staff around the use of PPE. These issues were addressed immediately by the registered manager.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People were supported with foods and drinks they enjoyed. People were supported to access healthcare services and staff had good working relationships with external professionals.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 22 September 2022). 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.

At our last inspection we recommended the provider review their medicines procedures. At this inspection we found recommendations had been addressed.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Dene Grange 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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Dene Grange 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 1 inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Dene Grange 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. Dene Grange Care Home is a care home with 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 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 safeguarding and commissioning teams, the local infection control team, the fire service, the medicine's optimisation team for the area and Healthwatch to gain feedback. 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 11 people and 2 family members at the home. We contacted a further 10 family members via phone or email about their experience of the care provided. We contacted the whole staff team via email to gain their feedback. We communicated with 12 members of staff including the registered manager, nursing, care, administration, kitchen, domestic staff and the regional manager. We contacted 4 healthcare professionals and received feedback from 3.

We reviewed a range of records. This included 9 people's care and support records and multiple medicine administration records. We looked at 4 staff records in relation to recruitment and training. We also reviewed a variety of records relating to the management of the home, including policies and procedures, staffing rotas, accident and incident records, safeguarding records and reports.

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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection, the provider's procedures for assessing, reviewing and managing the risks to people's health and safety were not robust. This was a breach of regulation 12(1) 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 12.

- All aspects of people's care and support were risk assessed and regularly reviewed and their safety was monitored.
- Environmental risks were managed including fire safety. The fire service confirmed they were pleased with the action taken by the provider to address issues they had found.
- Refresher fire training had been completed and staff were able to tell us how to keep people safe in the event of a fire. Practice fire drills were also carried out and recorded.
- Staff understood people's individual risks and knew people well. This helped them to mitigate issues arising. One relative said, "The staff have quickly got to know (person) and seem to be tuned in to them and that is nice to see."
- The registered manager and maintenance person regularly undertook checks on the building and equipment.

Using medicines safely

At the last inspection we recommended the provider review their medicines procedures in line with best practice.

The provider had made improvements.

- Medicines were managed safely. Safe procedures were followed to order, store, administer and dispose of medicines. A small number of 'as required' medicine protocols and topical (creams) charts were not in place. We brought this to the attention of the registered manager who addressed this straight away.
- People's medicines were administered in line with their prescriptions and in a timely manner, particularly those required at specific times of day or before food. One person said, "I do know what medication I take and when I need to take it. It's always given to me on time."

Staffing and recruitment

- People were supported by sufficient numbers of staff. Call bells were answered swiftly, and staff had time to engage in conversation with people individually. One staff member said, "There is enough staff but sometimes it's busy. Don't think there is enough domestics though." We raised this with the registered manager who told us agreement had been confirmed to increase domestic staff on duty.
- Safe recruitment practices were followed. Checks had been made on employment history, references and with the Disclosure and Barring Service (DBS). The DBS helps employers make safe recruitment decisions and helps prevent unsuitable people working with people who use care and support services.
- Nursing staff had their personal identification numbers checked to confirm they were still registered with the Nursing and Midwifery Council.

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. Two members of staff did not follow effective PPE guidance. This was addressed immediately.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises. The home was clean and tidy but high touch points were not always fully monitored. The provider told us another domestic was to be added to shifts immediately.
- 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 was in line with government guidance. Relatives said they were welcomed into the home by staff and management.

We have also signposted the provider to resources to develop their approach.

Systems and processes to safeguard people from the risk of abuse

- People were safe. One person said, "Yes, I feel safe. Everybody is quick to help if I ask them to. If staff saw a problem, they'd sort it out straight away."
- Staff were trained to recognise signs of abuse and had safeguarding and whistleblowing policies and procedures to follow to help keep people safe. One staff member said, "Staff pride themselves on looking after residents very well. Any concerns at all would be reported straight away no matter what it was."
- Safeguarding concerns or allegations were raised with the local authority safeguarding teams and CQC and management carried out internal investigations in response to concerns raised.

Learning lessons when things go wrong

- Lessons were learnt when things went wrong.
- Accidents and incidents were reported, recorded and monitored for any trends forming. This helped the registered manager ensure that timely referrals to other healthcare professionals were made when needed.

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 our last inspection we rated this key question requires improvement. The rating for this key question has changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

At the last inspection the provider had not always ensured service design, decoration or maintenance met people's needs. This was a breach of Regulation 15 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 15.

- The service was adapted to meet people's needs. The service continued to be refurbished in line with the provider's improvement plans and was due for completion in the next few months.
- Bedrooms had been decorated and made homely and garden areas had been improved with new fencing.
- People and their relatives thought the environment was good and commented on the work which had been completed in the home. One relative said, "The owners have been doing a lot of work to improve the home, it's starting to look really nice." One staff member said, "Much better place to work now. Lots of things going on to improve the place."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Detailed pre-assessments were completed prior to people moving into the home. The pre-assessments supported staff to put a comprehensive care plan in place for people.
- Staff demonstrated a good awareness of people's individual support needs and preferences.
- People were able to make their own choices and preferences which were recorded. One person said, "I can get up whenever I want to. If I fancy a lie-in, I can."

Staff support: induction, training, skills and experience

- Staff were supported, and received suitable induction and training.
- Staff received regular supervision and an annual appraisal from the management team. One staff member said, "Feel supported, much better place to work now."
- Staff received induction into the service, including agency staff. This included an introduction to people and guidance on what to do in emergencies, particularly regarding fire safety.
- Staff received a range of tailored training which was regularly updated. This included online and face to face training. Staff told us any identified training needs would be addressed by the provider.

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

- People enjoyed the food prepared and were supported to eat and drink enough to maintain a balanced diet. One person said, "The food is very good; excellent and plenty of it."
- Special diets were supported, including soft or pureed diets. Food was well presented, but some pureed food would benefit from the use of moulds to make them look more appetising. We discussed this with the registered manager who was going to organise moulds to be purchased.
- People who needed additional support with meal times were given this in a dignified manner.
- The atmosphere in communal dining areas was conducive to promoting a positive and calm environment for people to enjoy their mealtime experience.

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

- Staff worked with other agencies to provide consistently good care.
- Staff supported people to be healthier and access various healthcare services.

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 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 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff were working within the principles of the MCA. Applications to restrict people's liberty had been applied for and once confirmed were monitored to ensure they continued to be valid.
- Care plans clearly described what decisions people could make for themselves and how staff needed to support them with others.
- Staff requested consent before care was delivered where required.

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 requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection systems were not robust to ensure the quality of the service and ensure essential tasks had been completed and people's needs were met. This was a breach of regulation 17 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.

- Quality assurance systems were in place and had been enhanced to identify shortfalls and ensure people's needs were met. The management team ensured any issues were resolved quickly.
- The registered manager and staff team understood their roles. The registered manager was very keen to continue to improve the service and she explained what was planned for the next few months, including work to further enhance garden areas with individual plots for people to nurture if they wished.
- Regulatory requirements were met. The registered manager notified the CQC of certain events involving people, such as any serious injuries, deaths and allegations of abuse.

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

- There was a positive culture promoted within the home. People appeared happy and staff engaged well with them.
- People said they were well treated by staff. One person said, "The carers are all lovely. They are very knowledgeable about how to look after us. They can spot if someone is poorly straight away."
- Staff told us they felt supported by the registered manager.
- People and their relatives said the registered manager was friendly, visible throughout the service and responsive.
- Communication throughout the home was good and relatives commented on how staff kept them up to date with changes in people's health or other issues arising.
- The management team had a programme of continuous learning and improving care. Business continuity plans were in place should an emergency arise.
- The service had actions plans in place after identifying ways to improve care. These were closely monitored by the registered manager and senior management team.

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 duty of candour and their responsibilities. They apologised and were open and honest when things went wrong and reported concerns to relevant people and organisations.

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

- Feedback from people, their relatives and staff was encouraged. Surveys and meetings were part of the feedback processes in place. Feedback was analysed and acted on to support the improvement of the home.
- Relatives told us the home was well managed and they had opportunities to discuss the care being delivered to their loved one. One relative told us, "We have been asked questions about (person's) care and what (person) likes and does not like. Yes, we felt fully involved with the care planning."
- Staff had opportunities to be involved in the home in a number of ways, including during staff meetings, handover sessions and regular supervisions.
- The staff team worked in partnership with others. Records confirmed a range of healthcare professionals, relatives and other advocates had been involved with people to help provide a holistic package of care. One healthcare professional said, "I have found all staff very helpful. When I have spoken to my client's family's recently, they are always positive about the care their family member receives at the care home."