Derbyshire County Council

The Grange Care Home

Inspection report

88 Southgate
Eckington
Sheffield
South Yorkshire
S21 4FT

Tel: 01629537487
Website: www.derbyshire.gov.uk

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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

The Grange is a modern purpose built, single storey care home. It can accommodate up to 25 older people, with bedrooms and communal areas. The home is divided into three wings. One of the wings has six rooms used to provide intermediate care services. This part of service is used to reduce the admissions to hospital and support discharge from hospital by providing rehabilitation support to enable people to return home.

At the last inspection on 13 May 2015, the service was rated Good. At this inspection we found the service remained Good.

People told us they felt safe with the staff that supported them. Identified risks were managed in a way that ensured risks to people were minimised. People were supported to take their medicine when needed in a safe way. Staff understood what constituted abuse or poor practice to support people from the risk of harm. Checks were made before staff started work to ensure they were of good character and suitable to work in a care environment.

Sufficient staff were available to ensure people's needs were met. Staff received training and supervision to support and develop their skills. People were supported to have control of their lives and promoted their independence. Staff understood people's preferred communication method and the support they needed to make their own decisions and staff supported them in the least restrictive way possible. When people were unable to consent to specific decisions they were supported in their best interest.

Support plans where developed with people and their representatives to enable them to be supported in their preferred way. People's care was reviewed to ensure it accurately reflected their needs. People dietary requirements were met and they received support from health care professionals to ensure their well-being was maintained.

People were supported by staff in a kind and caring way and staff understood their likes and dislikes. People told us that they liked the staff and we saw that people's privacy was respected by the staff team. The staff and management team made visitors feel welcome and they were approachable. People were treated with respect and supported to maintain their dignity.

People were supported to raise concerns and express their views and opinions about the service provided. There were systems in place to monitor the quality of the service to enable the registered manager and provider to drive improvement. The registered manager understood their role and ensured we received notifications about events effecting people which occurred at the service. The last CQC rating given was displayed at the home and accessible on the provider's website.

Further information is in the detailed findings below.

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.

People were supported by staff that understood their responsibilities to keep them safe from harm. Risks to people's health and welfare were identified and managed. There was enough staff available to support people. The recruitment practices in place checked staff's suitability to work with people. People's medicines were managed safely and they received their medicines as prescribed. Arrangements were in place to minimise risks to people's safety in relation to the premises and equipment.

Is the service effective?

Good

The service was effective.

People were supported by skilled staff who supported them to make decisions and had guidance on how to support people in their best interests when they were unable to make decisions independently. People received meals that met their nutritional needs. People were supported to maintain good health and to access healthcare services when they needed them.

Is the service caring?

Good

The service was caring.

Staff were kind and caring towards people and their visitors. People's privacy and dignity was respected and they were supported to maintain their independence and relationships that were important to them.

Is the service responsive?

Good

The service was responsive.

People's needs were met and they were supported to participate in social activities. People and their relatives were involved in

discussions about how they were cared for and supported. The provider's complaints policy and procedure was accessible to people who lived at the home and their relatives.

Is the service well-led?

Good

The service was well-led.

People told us the manager was approachable and were encouraged to share their opinions about the quality of the service. This enabled the provider to make improvements. Staff felt supported in their work and quality assurance checks were in place to monitor and improve the service.

The Grange Care Home

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The unannounced comprehensive inspection of The Grange took place on the 19 October 2017 and was carried out by two inspectors. The inspection was prompted in part by notification of an incident following which a service user died. This incident is subject to a coroner's investigation and as a result this inspection did not examine the circumstances of the incident. However the information shared with CQC about the incident indicated potential concerns about the management of falls. This inspection examined how falls were managed at The Grange.

We reviewed information received since our last inspection in May 2015 this included information from the local authority and notifications received from the provider. Notifications are changes, events or incidents that providers must tell us about. We also reviewed the information in the provider information return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

To gain people's views about the care and to check that standards of care were being met we spent time observing care and support in the communal areas. We observed how staff interacted with people who used the service. We spoke with six people who used the service, two visitors and one visiting professionals, the cook, five members of care staff, the deputy manager and the service manager.

We looked at the care records for four people. We checked that the care they received matched the information in their records. We also looked at records relating to the management of the service, including quality checks and staff files.

Good

Is the service safe?

Our findings

People felt safe with the staff. One person said, "I feel safe with the staff, I enjoy the banter with them." One visitor told us," The staff take care of my relative and keep them safe. It's very reassuring." We saw that the staff had a good rapport with people and they were relaxed and comfortable with the staff supporting them.

Staff understood the signs to look out for that might mean a person was at risk of harm and knew the procedure to follow if they identified any concerns or if any information of concern was disclosed to them. One member of staff told us, "If I had any concerns I would go to the manager and they would report it to the local authority safeguarding team." We saw that staff had undertaken training to support their knowledge and understanding of how to keep people safe. The management team followed the safeguarding procedure and reported safeguarding concerns to the local authority. Records demonstrated that referrals were made when needed and we had been notified of these.

Staff told us they were aware of the whistleblowing policy and knew they could contact external agencies such as the local authority or the care quality commission. Whistle blowing is the process for raising concerns about poor practices. One member of staff told us, "I have had to report concerns before and the manager handled it well. I would feel confident to do it again if I needed to."

The staff knew about people's individual risks and any equipment they used to support people safely. The care plans demonstrated that risks to people's health and wellbeing were assessed. We saw that equipment was in place as reflected in care plans, such as sensor mats where people were at risk of falls. One person's visitor told us, "My relative has a bed sensor to alert the staff if they get up, it keeps them safe."

Risk assessments provided staff with detailed guidance on how to support the person and we saw that these were followed. We saw that equipment was maintained and serviced as required to ensure it was safe for use.

Plans were in place to respond to emergencies, such as personal emergency evacuation plans. The plans provided information about the level of support a person would need in the event of fire or any other incident that required the home to be evacuated. The information recorded was specific to each person's individual needs.

We saw and people confirmed that staff were available to them. One person said, "There is always enough staff to my knowledge; when I buzz for them they come." Another person told us, "If I need the staff they come straight away." A person's visitor told us, "There seems to be plenty of staff and some work out in the community as well when people go home." We spoke with staff that worked in the intermediate care unit and staff that worked within the residential unit. The staff within the intermediate care unit confirmed they also worked as community care workers within people's own homes. One member of staff told us. "When people in the intermediate care unit go home it means we can continue their support at home on a short term basis; to support them back in to their home environment. It also means people get that continuity in

their care; as they already know us."

The provider checked staff's suitability to work with people before they commenced employment. Staff told us they were unable to start work until all of the required checks had been done. We looked at the recruitment checks in place for staff. We saw that they had Disclosure and Barring Service (DBS) checks in place. The DBS is a national agency that keeps records of criminal convictions. The staff files seen had all the required documentation in place.

People received their medicine as needed. One person said, "I always get my medicines on time." Another person said, "They (staff) are very good with the pain killers when I need them and when I've had a bath they put my cream on." We observed people being supported to take their medicine and saw this was done in a considerate way and at the person's own pace. Medicines were stored securely and were not accessible to people who were unauthorised to access them. Clear records were in place that demonstrated people received their medicine as prescribed and if not, the reason why.

Good

Is the service effective?

Our findings

People confirmed that they were happy with the support they received. One person told us, "A person's visitor told us, "[Name] is looked after well. I feel very lucky they have a place here. They know their needs very well." One member of staff said, "The training we get is always updated. I have just had a moving and handling refresher; which is useful as we always learn something new." The deputy manager told us that new staff completed the care certificate. This is an induction that sets the standard for the skills, knowledge, values and behaviours expected from staff within a care environment. This demonstrated that new staff received the support and training required to meet people's needs and maintain their safety. Agency staff were used as needed to maintain the staffing numbers. . One agency staff told us, "When I first came here I remember having an induction and worked with two other staff. This helped me a lot. I am always involved in the handover between shifts and am given information about people. I love it here the residents are nice and the staff and management are easy to get along with."

Staff confirmed they received supervision. One member of staff told, "I get regular supervision and we discuss the training I've had and if there is any other training I need. We can ask for any specific training if we feel we need it." Another member of staff said, "We can go to the manager at any time we don't have to wait for supervision to discuss any issues."

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 people lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. We saw that mental capacity assessments were in place where people needed support to make specific decisions. The information in people's assessments and care plans reflected their capacity when they needed support to make decisions. Staff confirmed they were provided with training to support their understanding around the Act. Discussions with staff demonstrated they understood the principles of the MCA.

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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). One person had restrictions placed on them as they needed support for their safety. An application to lawfully restrict their liberty had been made and was waiting approval. This demonstrated that where people were being restricted this was made in their best interests and in accordance with the act.

Where people had capacity to make decisions staff understood their responsibilities for supporting them to make their own decisions and we saw this was done. For example, at the lunch time meal we saw that people were offered choices. One person requested an alternative to the meals options on the menu and this was provided for them.

People told us they enjoyed the food. One person said, "The meals are all very good." Another person told us, "They have asked us what meals we like and changed some things on the menu." People confirmed that alternatives were provided if they preferred. Staff were aware of the need for people to have food and drinks at regular intervals and we saw that people were encouraged to drink throughout the day.

Care plans included an assessment of people's nutritional requirements and their preferences. We spoke with a member of the catering team who confirmed they were provided with information regarding people's specific dietary requirements and preferences. We saw that people's dietary needs were met and that specific diets were followed in accordance with their support plans.

People told us that they had access to health care professionals including, the doctor, dentist, optician and chiropodist. One person told us, "I've not been well recently and have seen the GP." People's representatives confirmed they were kept informed of any changes in health or other matters. One person's visitor told us, "They always keep us informed if there are any health issues." People's health care needs were monitored and we saw that referrals were made to the appropriate health care professionals when needed.

Good

Is the service caring?

Our findings

People liked the staff. One person said, "The staff are friendly; they have a laugh and a joke with me" Another person told us, "They (staff) are all very nice." We observed a positive and caring relationship between people and the staff supporting them. People were comfortable with the staff and the staff demonstrated a good understanding of their needs and the level of support they required.

People were supported to be as independent as they could be. One person told us, "The staff let me do what I can for myself; they help me when I need it." We observed that staff demonstrated a good understanding of people's abilities and limitations and we saw them actively encouraging independence whilst being conscious of people's safety. For example, several people moved around the home independently with walking aids. We saw that corridors were clutter free to allow this and communal areas were appropriately laid out to allow safe passage between furniture. The environment provided good signage to enable people to find their way around the home. We saw that bedroom doors included people's names and photographs along with information about the support they would need to evacuate the home in an emergency. Information was also available to orientate people to the date and time of year through a weather board that was on display near the entrance to the home.

Staff supported people's need for privacy, for example, we observed staff knocking on bedroom doors before entering. People confirmed that the staff supported them to maintain their dignity when they received care and support. One person told us, "The staff respect my dignity when they are supporting me in the bathroom and make sure I am covered up." A visitor said, "The staff always support my relative to keep clean and dress nicely; which is important to them."

People were supported to keep in contact and maintain relationships with their family and people that were important to them. One visitor told us, "We can visit when we wish; the staff are very welcoming, friendly and helpful."

Good

Is the service responsive?

Our findings

People and their representatives confirmed that their needs were met by the staff team. One person told us, "The care here is great; the staff support I get works for me," A person's visitor told us, "I am very happy with care my relative receives; the staff know them well and support them as needed." A visiting professional told us that people's needs were met by the staff team and said, "The staff follow instructions the support they provide is good." Staff demonstrated a good understanding of people's individual needs and responded to people with consideration and empathy. One member of staff told us, "I know everyone's needs and preferences. The residents are like family to me." We saw that staff had a laugh and a joke with people which was received well and supported a homely and friendly environment.

People's representatives confirmed that they were involved in reviews of their care. One visitor told us, "They keep us informed about the care and involved in decisions about how my relative is cared for." Opportunities were provided for people to participate in recreational activities. People were supported to participate in activities by the staff team. A timetable of activities was on display near the entrance to the home and we saw this was followed. On the day of the inspection we saw people participating in a game of bingo. One person told us, "We have concerts sometimes." We saw staff supporting a person with their knitting and people sat chatting with each other and reading newspapers. Another person went out each day for a walk locally with staff support.

People confirmed they would feel comfortable telling the manager or staff if they had any concerns. One relative told us, "I have no complaints and would feel confident if I needed to raise any concerns as the management are really approachable." A complaints procedure was in place and guidance was available in communal areas of the home on how to express a concern or raise a complaint. A system was in place to record the complaints received. The deputy manager told us that no complaints had been received within the last 12 months.

Good

Is the service well-led?

Our findings

There was a registered manager in post. People, their visitors and the staff told us they liked the registered manager. One person told us, "The manager and all the staff are very good." A visitor said, "The manager is very approachable." A member of staff said, "The manager is brilliant and sorts out any issues."

The registered manager was not on duty on the day of the inspection. The deputy manager and senior carers were visible throughout the day and were actively involved in supporting people and stopping for a chat with them. Staff confirmed they felt supported by the management team. Staff demonstrated that they understood their roles and responsibilities and told us they enjoyed working at The Grange. One member of staff said, "I love working here, everyone works well together."

The views of the people living at the home were sought on a regular basis through annual satisfaction surveys and regular meetings. People told us, "They do ask our opinion about how it's run here."

The registered manager undertook quality audits, using the provider's corporate tool to assess the standards of care and support provided. This included analysing accidents, incidents and falls to identify any patterns or trends. We saw that when a pattern was identified the registered manager had taken action to minimise the risks of a re-occurrence. For example, referrals were made to the appropriate professionals; such as the falls team and equipment provided to monitor and support people's wellbeing.

We saw that audits were undertaken on the management of medicines and actions taken as needed. For example, the registered manager had identified that improvements were needed to the recording of creams and lotions; as they were not being completed on their medication administration records. They had introduced a new recording system for care staff to complete. These records were kept in people's rooms to enable care staff to complete after administering. Other audits included monthly care plan reviews, daily and weekly fire safety checks.

It is a legal requirement that a provider's latest CQC inspection report is displayed at the service where a rating has been given. This is so that people, visitors and those seeking information about the service can be informed of our judgments. We found the provider had conspicuously displayed their rating in the home and on their website.