

## Heera Care Ltd

# The Grange

### **Inspection report**

Everest Road Scunthorpe DN16 3EF

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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

The Grange is a residential care home providing personal care for up to 14 people in a single storey building. The service provides short term support to older people and younger adults, some of whom may be living with dementia, physical disability, sensory impairment and mental health conditions. At the time of our inspection there were 13 people using the service.

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

People told us they felt safe and well cared for, staff knew their individual needs well. People said they could always go to a staff member or the manager if they were not satisfied, and they spoke positively of staff and managers.

Staff were confident about how to raise concerns to safeguard people. Robust recruitment and selection procedures ensured suitable staff were employed.

There were enough well trained and knowledgeable staff to provide a consistent quality service. Staff completed training including infection prevention and control. There were regular competency and spot checks with all staff regarding safe use of personal protective equipment (PPE) and infection prevention and control procedures.

Medicines were safely administered and recorded accurately. Individualised risk assessments were in place and reviewed regularly.

The premises were clean and tidy, the layout provided people with the opportunity to socialise with others if they wanted too. People's dignity was promoted, and we observed positive interactions with staff.

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.

Managers and staff had positive working relationships with external agencies and healthcare professionals. Staff supported people to access healthcare professionals when required ensuring that people's needs were met in a timely manner.

There was a quality assurance system in place. The management team carried out regular reviews and spot checks to ensure the quality of the service and the safety of people who used it.

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

### Rating at last inspection

This service was registered with us on 13 November 2020 and this is the first inspection.

### Why we inspected

This was a planned inspection based on the fact this is a new service and yet to be rated.

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 The Grange 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 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.	



# The Grange

**Detailed findings** 

## Background to this 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 was carried out by one inspector.

#### Service and service type

The Grange 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. The Grange is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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

#### 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 (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 used all this information to plan our inspection.

### During the inspection

We reviewed a range of records. This included two people's care records and risk assessments. We looked at three staff files in relation to recruitment, staff supervision and training. A variety of records relating to the management of the service, including policies and procedures were reviewed. We spoke with two people using the service and the registered manager, service manager, one duty manager and three support workers.

### After the inspection

We continued to seek clarification from the provider to corroborate evidence found. We looked at more audits, care plans, reports and policies.



### Is the service safe?

# Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from the risk of abuse. People told us they felt safe. One person told us "I feel very safe here, the staff are lovely." A professional told us, "I feel this is a very safe service for people, they are well supported and their care needs are met."
- Staff received safeguarding training and knew how to raise any concerns.
- Where safeguarding concerns had been raised, investigations and appropriate action was taken.

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

- Staff effectively assessed and managed risks to people's health, safety and wellbeing.
- Systems were in place to identify and reduce the risks to people who used the service. People's care plans included risk assessments. These provided support workers with a clear description of any risks and guidance on the support people needed.
- Fire safety procedures were in place along with regular checks of equipment.
- Accidents and incidents were recorded and analysed, which identified any corrective action that might be required. The registered manager looked for ways to learn from these and make improvements to people's care.

### Staffing and recruitment

- Staff were recruited safely. The provider followed safe recruitment procedures to make sure staff were suitable to work at the home.
- Staffing levels were safe. There were sufficient numbers of staff deployed to ensure people's care and support needs could be met safely. People told us they felt there was enough staff to meet their needs.

### Using medicines safely

- Medicines were managed safely. People received their medicines on time from trained staff.
- The provider ensured regular audits were carried out to support the safe administration of medicines and identify any areas of concern or errors.
- Protocols were in place for medicines prescribed for use 'as and when required'. This supported staff to identify when a person required additional prescribed medicines, including pain relief.

### Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider was admitting people safely to the service.

- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was accessing testing for people using the service and staff.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.



# 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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- People's needs were met. People's needs were assessed and regularly reviewed, so staff had information about how to support them effectively.
- Discharge from hospital assessments helped to ensure care was planned and delivered in line with people's preferences and needs.
- Care was provided by a consistent staff team. One person told us, "The staff definitely meet my needs, I just ring and the staff will assist me to get up."

Staff support: induction, training, skills and experience

- Staff had the skills and knowledge to support people.
- Staff received a comprehensive induction and on-going training to support them in their role. They also received regular supervisions and appraisals.
- Staff completed training to ensure they could meet people's specific needs. The service manager told us, "We try and mix the teams with staff's different levels of experience and knowledge, it is a good mix and works well."
- Staff were very satisfied with the training and told us they had completed both mandatory and optional training and could access other training if needed.
- People and external professionals spoke very positively about the skills of staff. One person told us, "Staff are all good, I can't fault them, they are really nice." A social care professional told us care staff seemed skilled to be able to support people within the service.

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

- Information about people's nutritional needs and preferences was recorded in their care plans, so staff had access to the information they needed.
- People told us, "I have asked for an alternative and they gave me what I asked for" and, "There is always plenty of drinks, I have a jug of juice in my room."

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

- Information was recorded about each person's health needs. People's care records showed involvement and guidance from other agencies to meet people's needs. This included GPs, intermediate care nurses and occupational therapists
- Staff worked effectively with professionals to ensure people received coordinated care.

• Referrals were made in a timely way to healthcare professionals. This ensured people received support to maintain or improve their health and wellbeing. A health care professional told us, "Staff are very effective in meeting people's needs and escalate issues when required."

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

• The environment was clean and fully accessible, with a range of adaptations and equipment to meet people's needs. All bedrooms had their own ensuite.

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.

- Systems and processes to assess people's capacity were in place and used where necessary.
- Staff had a good understanding of the principles of the MCA and asked for people's consent before they gave care and support.



# 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.

This is the first inspection for this newly registered service. This key question has been rated good. 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 were treated with kindness and respect and interacted with staff in a positive and meaningful way. People appeared comfortable, relaxed, and happy at the service.
- People were respected, listened to and well cared for. One person told us, "The staff are friendly, I enjoy their company and I hope they enjoy mine."

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

- People were involved in making decisions about their care. One person told us, "I discussed coming here with my social worker, it's a nice place."
- People were supported to discuss any changes to their care plans.
- Staff knew people's choices and preferences in relation to their care. Care plans also detailed wishes and preferences. A social care professional told us "I have seen staff offer choices, giving people privacy and treating them with dignity." A health care professional told us, I have observed staff promoting choice, independence, privacy and dignity on a regular basis. Service users have also commented on the good choices."

Respecting and promoting people's privacy, dignity and independence

- People were supported by staff who respected their privacy.
- Staff maintained people's dignity and promoted independence. A support worker told us; "I believe I know the service users well and their individual needs. I am aware of certain practices and routines they have to keep their independence where they can."



# Is the service responsive?

# Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. 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 received care and support specific to their needs and preferences. Each person had a detailed care plan, which contained up to date information to help staff provide the care and support people needed.
- People and their representatives were involved in reviews of their care. One person told us "My wife is involved in meetings regarding my care plan."
- A health professional told us, "We are always informed of any issues and are made aware of the changing needs of the service users."

### Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

• People's communication needs were met. Staff adapted information and communication methods to suit people's preferences. For example, providing large print information, using picture cards and translation apps to suit people's preferences.

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 were supported to keep in regular contact with friends and relatives.
- Staff consulted with people to plan activities they enjoyed, which included music therapy, having manicures and spending quality time with people talking to them. One person told us, "The staff make time to talk to me."

Improving care quality in response to complaints or concerns

- There were systems in place to ensure any complaints were appropriately addressed and responded to.
- People told us they would feel confident raising any concerns. A person told us, "I would speak to the staff if I had any complaints, but I don't have any."

### End of life care and support

• No one using the service was receiving end of life care. Staff completed End of life training to ensure they could provide responsive, sensitive end of life care, should this ever be 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.

This is the first inspection for this newly registered service. This key question has been rated 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

- The management team and staff promoted a very positive, person-centred culture. This resulted in a quality service and good outcomes for people.
- Staff enjoyed working at the service, comments included, "Staff morale is high, I enjoy working at The Grange" and, "I love my job, it feels like home from home."
- Staff were very motivated and demonstrated commitment to the people they cared for.
- People were very satisfied with the care provided and the service had received many compliments and positive feedback.

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 to be open, honest and apologise if things went wrong.
- The registered manager and service manager worked openly with the inspector during the inspection.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The provider understood their legal responsibility to notify CQC about incidents that affected people's safety and welfare. They had submitted information to CQC in a timely way about significant events that occurred in the home.
- Policies and procedures were up to date and in line with best practice.
- The provider had contingency plans for people in case of an emergency to ensure minimal disruption to their care and in response to the COVID-19 pandemic.
- There were good communication systems; handover was undertaken daily to action plan and exchange important information.
- Systems were in place to measure the quality of the service regularly to make sure they continued to deliver a high-quality standard of care and support continuous improvement. The registered manager carried out regular audits of the service and ensured actions were taken to resolve any issues identified.

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

- Staff meetings were held regularly to discuss relevant information. Staff told us they attend meetings, they could share ideas or voice concerns and felt listened to.
- Staff told us they were supported by the registered manager and the provider. One staff member told us, "Our manager is approachable and friendly and always tries to meet staff needs."
- The provider routinely sought feedback from professionals and people who used the service about their care as part of their quality assurance checks.

### Working in partnership with others

• People were supported by a range of healthcare professionals with whom the registered manager and staff had forged good working relationships. A health care professional told us, "The Grange is very well managed with staff who have positive outlooks." A social care professional told us "The service always seems to be well-led and the management are involved with the service users and their plans of care."