

Oldfield Residential Care Ltd

The Grange Residential Care Home

Inspection report

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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

What life is like for people using this service:

People who lived at The Grange Residential Care Home told us they were happy with the care and support that they received. Staff treated people in a kind and caring way and gave people choices about the way their care and support was delivered. People were encouraged to live as independently as possible.

Staff were suitably trained and knew people's needs well. Risks were managed safely and staff knew how to protect people from the risk of abuse and harm.

Care plans were individualised and people had their life histories documented to help staff deliver effective and personalised care. People were involved in the planning of their care.

People and staff thought the management team were approachable and supportive.

More information is in the full report.

Rating at last inspection:

At our last inspection (report published 16 April 2016) the service was rated Good overall with the key question of Effective rated as Requires Improvement. At this inspection, the key question Effective is now rated as Good.

About the service:

The Grange Residential Care Home provides accommodation and personal care for up to 34 people, some of whom may be living with dementia. At the time of our inspection, there were 34 people using the service. The home is set out over three floors and has three bedrooms that are double occupancy.

Why we inspected:

This was a planned inspection based on the date and the rating of the last inspection.

Follow up:

We will continue to monitor the service through information we receive until we return to visit as per our re-inspection programme. If any concerning information is received 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.

The Grange 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 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.

Inspection team:

The inspection took place on 23 January 2019 and was carried out by one inspector and one 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:

The Grange is a care home. People in care homes receive accommodation and nursing or personal care. 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. 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:

The inspection was unannounced.

What we did:

Before the inspection we looked at information we held about the service to help us plan our inspection. We reviewed the information in the Provider Information Return (PIR). This is information we ask the provider to send to us at least annually to give us key information about the service such as what it does well and any improvements they plan to make. We asked the Local Authority for any information they had which would aid the planning of our inspection.

We considered other information we held about the service. This included notifications about events that happened at the service, which the provider is required to send to us by law such as deaths and safeguarding referrals.

During the inspection visit we spoke with seven people who used the service and four relatives. We spoke with one visiting professional, two members of care staff, the cook, the kitchen assistant, the acting deputy manager and the registered manager. We observed the care and support that people received in the communal areas to assess how they were supported by staff.

We looked at two people's care files and saw records that related to the management of the service such as accidents, incidents and complaints records. We looked at audits and we looked at the way medicines were stored and managed.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm.

Good: ☐ People were safe and protected from avoidable harm. Legal requirements were met.

Supporting people to stay safe from harm and abuse, systems and processes

- People were protected from the risk of abuse and harm by staff who had been well trained.
- One person said, "It's amazing here, I feel really safe."
- A relative said, "I feel very reassured that [person's name] is safe here and I go home totally confident that they will be okay."
- Staff told us that they had received safeguarding training and the training records evidenced what staff told us.
- The registered manager had systems and processes in place to report any safeguarding concerns to the Local Authority.

Assessing risk, safety monitoring and management

- People's risks to their health and well-being were assessed and planned for.
- Risk assessments were completed in a timely way. They identified hazards and risk triggers for people and had actions for staff to follow to mitigate the risk of harm.
- Staff knew people well and could tell us how they supported people to keep them safe.

Staffing levels

- There were enough staff to meet people's needs.
- People told us they received care and support in a timely way.
- Our observations supported what people had told us.
- Staff were recruited in a safe way to prevent the risk of unsuitable staff working with vulnerable people.

Using medicines safely

- Medicines were managed safely.
- Protocols were in place to guide staff when administering 'as required' medications or topical creams.
- Controlled drugs were stored, administered and recorded in accordance with the law and best practice guidance.

Preventing and controlling infection

- Staff were observed wearing Personal Protective Equipment (PPE).

- There was an infection control policy in place.
- The environment was clean and odour free.

Learning lessons when things go wrong

- The registered manager had mechanisms in place to record accidents and incidents as they occurred.
- Themes and trends were analysed and appropriate action taken to alleviate risk of the incidents reoccurring.

Is the service effective?

Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

Good: ☐ 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

- Pre-assessments were completed with people and their relatives before they moved to live at The Grange.
- Assessments and care plans were reviewed regularly and records were updated to reflect any change in need.
- Staff had responsibility for keeping care records current and staff used the information in the care plans to provide effective care and support for people.

Staff skills, knowledge and experience

- Staff received a detailed induction at the start of their employment. This ensured staff were knowledgeable about the needs of the people they were supporting.
- A relative said, "The staff seem to be well trained and understand [person's name] needs."
- The registered manager had recently changed their training provider and staff were being given additional training because of the change.
- On the day of our inspection we observed training taking place throughout the duration of the day.

Supporting people to eat and drink enough with choice in a balanced diet

- Food was prepared and served in accordance with people's dietary requirements.
- The provider used an 'in-house' dietician who visited the service monthly to continually monitor people's nutritional needs.
- People received choices of food and were offered alternatives to the menu, as and when, people required.
- One person said, "I enjoy the food, it is always very good."
- People received regular drinks and snacks throughout the day. A relative told us, "The food is good and [person's name] has lots to eat and drink."

Staff providing consistent, effective, timely care

- Staff shared information with each other through a handover process and a communication book. This ensured that staff were responding to people's needs in an effective and consistent way.
- Records were kept when other professionals were involved with people. This meant that the service and other visiting professionals were aware of people's current needs and the most appropriate form of care and support could be provided.

- People had access to healthcare. The service worked closely with the local General Practitioner (GP) who visited the home on a weekly basis. We observed the GP visiting and assessing people's medical needs during our inspection.

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

- People were able to decorate their rooms with their personal belongings to create a homely and comfortable environment.
- One of the communal areas had recently been decorated and people had been involved in choosing the décor.
- The service used signage on doors and bedrooms to help people orientate around the building.

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 with appropriate legal authority. 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 were being met.

- People had their mental capacity assessed in line with the relevant legislation.
- Where people lacked capacity, decisions were made in people's best interests and people were supported in the least restrictive way possible.
- The registered manager had made the necessary applications to the Local Authority to ensure that where people were being deprived of their liberty, this was done lawfully.
- Staff demonstrated that they understood the principles of the MCA.

Is the service caring?

Our findings

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

Good: ☐ People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- People were happy with the care provided by staff.
- One person said, "I love it here and it's all because of the kind and friendly staff."
- A relative told us, "We are very happy with the home. All the staff are welcoming and friendly."
- We observed caring and compassionate interactions between people and staff. For example, one person became upset and distressed. A staff member tried to ascertain what was wrong with the person and gave them reassurance and comforted them with appropriate physical contact.
- The registered manager and staff took the time to talk to people and ask them how they were feeling. People engaged in the conversations and showed positive signs of emotion such as smiling and laughter.

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

- People were given choices about how they wanted their care to be delivered.
- People were given the opportunity to participate in resident meetings to express their views and wishes. We saw minutes of meetings that evidenced people had been involved and had shared their ideas, thoughts and feelings.
- The service took into consideration the needs of people with protected characteristics under the Equality Act 2010. These included age, race, religion and belief. Support plans identified people's specific preferences and staff understood and respected these. The registered manager told us that they would reconsider developing their assessment documentation to include additional characteristics such as marriage and civil partnership and sexual orientation.

Respecting and promoting people's privacy, dignity and independence

- Some people who had shared rooms told us that it was difficult to have time alone or for their privacy to be fully respected. We shared these findings with the registered manager.
- People told us that they had their dignity respected.
- A relative said, "The care is very good and they [staff] have respect for dignity and privacy."
- A staff member said, "It's the way we talk to people. We get to know people and treat people the same. We always knock on people's doors and close doors and curtains when we are supporting people."
- Another staff member said, "I treat everyone as if they were my Mum or Dad."
- We observed staff encouraging people to be as independent as possible and offering reassurance and praise when objectives were met.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs.

Good: ☐ People's needs were met through good organisation and delivery.

How people's needs are met

Personalised care

- The service had a schedule of activities that took place and we observed people engaging in a game of dominoes during our inspection. However, some people told us that they did not always have enough things to do to keep them occupied or stimulated. We fed this back to the registered manager and the deputy manager who stated that they would reconsider how activities were developed with people, scheduled and run.
- We saw that the service had arranged for singers to come to the home and perform for people. There were plans for a Valentine's Day celebration and the deputy manager and the registered manager spoke with us about the activities that had taken place such welcoming the Pets As Therapy service into the home.
- Care plans were person-centred and identified people's needs and wishes. Support was delivered in line with people's preferences.
- People and their relatives were involved in the care planning process. One relative said, "I do feel we are kept involved about aspects of [person's name] care. They lack mental capacity so it is very important to us."
- People and their relatives were encouraged to complete life history books. These books contained key information for staff to identify what was important to people. Information included family history; friendships; values and beliefs; likes and dislikes and hobbies and interests.

Improving care quality in response to complaints or concerns

- The service had a complaints policy in place.
- The registered manager demonstrated how they applied the complaints policy in relation to complaints that they received.
- People, their relatives and staff knew how to make a complaint.

End of life care and support

- At the time of our inspection, no one was in receipt of end of life care.
- People were given the opportunity to discuss their end of life needs and wishes and the service understood the sensitive nature of this subject matter for some people.
- We saw that some people had their wishes documented in their care plans and for others, information had and was being collated over time. The registered manager told us that this was an on-going process.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

Good: ☐ The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Leadership and management

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- The registered manager had been at The Grange for 26 years and was committed to providing high quality, effective care for people. The registered manager said, "We are one big, happy family. I want everything to be right for people who live here, if it isn't then I will do something about it."
- People and their relatives spoke highly of the registered manager. One person said, "I can always speak to [registered manager's name]."
- A relative said, "I find [registered manager's name] very approachable and I will always speak to her if I have any concerns."
- A staff member said, "The registered manager is forward thinking and approachable and if we need them, they are here at the drop of a hat. They live for this place."
- The registered manager understood their responsibilities under the Duty of Candour. This places an obligation on providers and registered managers to be open and honest and take accountability when things go wrong.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- There was a clear staff structure in place and this supported good practice throughout the service.
- The registered manager had systems in place to assess and monitor the quality and safety of the service. Audits were completed regularly and action plans were put in place to address any identified issues.
- The provider had their ratings from their last inspection on display in the building and on the provider's website.
- The registered manager submitted statutory notifications to us, as required by law.

Engaging and involving people using the service, the public and staff

- Residents and their relatives were encouraged to attend meetings to feedback their thoughts and views about the service. The registered manager acknowledged that these meetings were not heavily attended and they were considering new ways to promote this opportunity.

- Staff had team meetings on a six-monthly basis and used these as a platform to share their thoughts and views about the service.
- The service had developed good community links and the registered manager shared examples of how the service had been involved with the local schools and nurseries in order to promote and improve quality of life for people. The local church visited the home regularly and people went out to church as they wished.

Continuous learning and improving care

- The registered manager was part of an association for registered managers and providers and they used various best practice initiatives to keep up-to-date with changes within the adult care sector and drive improvement through the service.
- Staff had regular supervisions with the registered manager whereby they could discuss their learning and development needs in order to provide better outcomes for people.

Working in partnership with others

- The service worked in collaboration with other professionals to ensure people received a high standard of care and support.