

Anchor Hanover Group

Middlesbrough Grange

Inspection report

Netherfields
Middlesbrough
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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

Middlesbrough Grange is a residential care home providing accommodation and personal care for up to 45 people. The service provides support to older people and people living with a dementia illness. Support is provided in one specially adapted building across two floors. At the time of our inspection there were 39 people using the service.

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

People's medicines were managed safely, but records around the application of creams and lotions were not robust. We have made a recommendation around this. People told us they felt safe and protected from avoidable harm. We found one safeguarding incident which had been investigated but had not been reported to the local safeguarding team or CQC. The registered manager confirmed this was an oversight. We have made a recommendation around the notification of safeguarding concerns.

Risks to people were appropriately managed and the environment was safe. People's support plans contained good information to help guide staff to keep people safe. There were enough suitably trained staff to safely support people and staff were recruited in a safe way. The home was clean and tidy and robust infection control measures were in place. Lessons were learnt when things went wrong.

People's needs were thoroughly assessed, and staff knew people's likes and dislikes. Staff had the right training and support. People were supported to eat and drink enough to maintain a balanced diet and staff had good knowledge about people's dietary needs. Staff made referrals to healthcare professionals appropriately. The home was designed to meet people's needs with different areas for people to use.

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.

Staff treated people with kindness, respect and dignity. People received person-centred care and were supported to be independent where possible and make their own choices. People were supported to communicate, and information was available in different formats for people. Complaints and concerns were dealt with appropriately.

There was a positive atmosphere in the home and staff enjoyed their jobs. There was a clear management structure and quality assurance audits were completed regularly. Communication between management and staff, people and relatives was good. Management sought feedback from people and acted upon this.

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

Rating at last inspection

This service has changed provider. The last rating for the service under the previous provider was good (published 23 May 2019).

This service was registered with us with the new provider on 6 May 2021 and this was the first inspection under the new provider.

Why we inspected

This was a planned inspection to assess the standard of care delivered by staff and award a rating.

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.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Middlesbrough Grange

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

This inspection was carried out by two inspectors 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

Middlesbrough 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. Middlesbrough 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.

Registered Manager

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 the inspection

We reviewed information we had received about the service since it was registered under the new provider. We sought feedback from the local authority and professionals who work with the service. We sought feedback from Healthwatch. 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 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 spoke with three people who used the service and 10 relatives about their experience of the care provided. We spoke with 13 members of staff including the registered manager, the district manager, one deputy manager, four senior care workers, three care workers, the cook, a kitchen assistant and a domestic assistant. We reviewed a range of records. This included five people's care records, three recruitment files and multiple medication records. A variety of documents relating to the management of the service, including training information, quality assurance documents and policies and procedures were reviewed.

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 for this service under the new provider. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Medicines were managed safely. Medicines were stored securely and at the correct temperatures.
- Robust risk assessments were in place around medicines, including which foods people should avoid to reduce the risk of adverse reactions.
- There was guidance in place for staff to know when it was appropriate to administer 'when required' medicines. The use of these medicines was monitored.
- Systems were in place to ensure time critical medicines were administered as prescribed and at the right times.
- Records for the application of creams and lotions were not always robustly completed.

We recommend the provider reviews their processes around creams and lotions to ensure recording is consistent and clear.

Systems and processes to safeguard people from the risk of abuse

- Staff kept people safe from the risk of abuse.
- People told us they felt safe. One person said, "I feel very safe and I am very well looked after." Relatives told us they thought their loved ones were safe and well supported. One relative said, "[Person] is safe, they [staff] check on them regularly and make sure they are okay."
- Staff understood their safeguarding responsibilities and knew how to keep people safe. Staff had received up to date training in safeguarding and knew what to do if they had any concerns.

Assessing risk, safety monitoring and management

- Staff appropriately assessed, monitored and managed risks to people's safety, health and wellbeing.
- The environment was safe. Routine safety checks were completed to ensure the premises were safe and well maintained. These checks included fire safety such as regular fire alarm checks and drills. Hoists and other equipment were routinely checked to ensure they were fit for use.
- Risks to individuals were appropriately monitored with robust person-centred assessments around areas such as the risk of falls, skin integrity and malnutrition. Appropriate action was taken to minimise risk, such as ongoing monitoring and referrals to healthcare professionals.
- Support plans contained good information to help staff safely care for people. Information sheets were available for staff around people's health conditions and how best to support them.

Staffing and recruitment

- There were enough suitably trained and experienced staff to safely support people.

- COVID-19 had impacted staffing levels, but staff spoke positively about how everyone had pulled together and worked as a team. One staff member told us, "It has been difficult covering sickness during COVID-19, but staff are good and step in."
- People and relatives told us there were enough staff. Comments included, "Staff come very quickly if I need them" and, "[Staff] are very busy but there are enough, and they are there to help when needed."
- Staff were recruited safely. Appropriate pre-employment checks were completed to ensure staff were suitable to support vulnerable people.

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 assured that the provider was using PPE effectively and safely.
- 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.
- There were no restrictions to visiting at the time of our inspection. This was in line with government guidance.

Learning lessons when things go wrong

- Systems were in place to ensure lessons were learnt when things went wrong. Incidents were recorded and analysed. Lessons were relayed to staff in handovers and team meetings.

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 service under the new provider. 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 care and support needs were assessed prior to them moving in, to ensure the home could meet their requirements.
- Staff regularly reviewed people's needs to ensure support plans were up to date.
- People's likes, dislikes and preferences were recorded within their support plans and this information was also kept up to date.
- Care and support was delivered in line with best practice guidance. Expected outcomes for people were recorded and monitored to identify if they were being met.

Staff support: induction, training, skills and experience

- Staff had the right training, skills and support to effectively and safely care for people. One staff member told us, "The training is excellent and if there is anything else we want, we just have to ask."
- Staff completed an induction when they started at the service.
- Staff were supported through regular supervisions and appraisals. Staff feedback included, "Supervisions are on a one to one basis and we are encouraged to be open and to discuss how we feel" and, "Everyone is approachable, and I have all the support I need."

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

- Staff supported people to eat and drink enough to maintain a balanced diet. People were offered balanced and nutritious meals, and snacks and drinks throughout the day. One person told us, "The food is good, I get a choice and they accommodate my needs."
- Staff identified people who were at risk of malnutrition and took appropriate steps to support them, which included weekly weights, fortified diets and referrals to dieticians.
- Staff were knowledgeable about people's dietary needs and were consistently provided with up to date information. One staff member told us, "We have the information on the tea trolley, in the kitchen and in the dining room. It is always there, and it is always updated."

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 effective care. Staff made appropriate referrals to healthcare professionals such as the dietician and the falls team.
- People had good access to the GP, the dentist, the optician and district nurses. One relative told us, "They always get doctors and dentists in; they are straight on it. Anything that needs sorting they do it."

- Staff sought prompt medical attention when needed. One relative told us about an incident where fast staff action had helped save their loved one's life.

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

- The service was designed to meet people's needs. Decoration was dementia-friendly to help support people find their way around and be more independent.
- There were different areas within the home for people to use. There was a hair salon, a bar, a shop and a newly created garden area. People's rooms were personalised with their own belongings and photographs.

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.

- The provider was working within the principles of the MCA.
- DoLS authorisations were in place where appropriate. The registered manager submitted applications to renew DoLS authorisations in a timely manner.
- Staff had a good understanding of the principles of the MCA and records were robust. Where people lacked capacity to make a particular decision, appropriate assessments were carried out, and decisions were made in their best interests and in the least restrictive way possible.

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 service under the new provider. 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

- Staff treated people with kindness and respect. One person told us, "Staff are very caring, everyone gives their best, they have all been brilliant."
- We observed positive interactions between people and staff. Staff spoke kindly to people and created a relaxed atmosphere. We observed people chatting, singing and laughing together.

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

- Staff offered people choice and supported people to make their own decisions where possible. One person told us, "They never tell me that I have to do something, and they always ask me if I want something done."
- Staff supported people to express their views. Staff used simple questions where appropriate and gave people time to respond. Staff knew people's likes and dislikes well, and this helped to support staff to act in people's best interests.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and supported to be independent where possible.
- People's support plans and daily notes completed by staff spoke about people in a respectful way. People's comments included, "They talk to me like a friend. They ask me what I would like, and they let me do things myself where I can" and, "They go out of their way for me. They do help me to get out and about, they order me a taxi when I want to go to town."
- Staff understood the importance of treating people with respect. Relatives told us, "My [family member] gets excellent care. They have very complex needs and they have always treated [family member] with dignity and respect" and, "They treat my [family member] very well, they are very caring and respectful."

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 service under the new provider. 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

- Staff supported people in a person-centred way. People's support plans contained good information about their histories, preferences, likes and dislikes. Staff knew the people they supported well.
- The registered manager was responsive to people's needs. One person told us, "I had issues with my room because it was too noisy. [Staff] responded and supported me to move to a quieter room."

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.

- The provider and registered manager understood their responsibilities under the Accessible Information Standard.
- Information was available in an 'easy read' format and pictorial format, and documents could be translated if needed.

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 take part in meaningful activities. Staff engaged people with one to one activities and group events such as day trips to the seaside, garden parties, and entertainers.
- Staff told us it could be challenging to dedicate time to activities if they were particularly busy. However, the staff team were committed to engaging people in activities they enjoyed, and a wide variety of events had taken place.

Improving care quality in response to complaints or concerns

- Complaints and concerns were dealt with appropriately. Issues were dealt with in line with the provider's policies and procedures.
- People told us any concerns were addressed. One relative said, "I raised a complaint informally with [the registered manager]. I felt she listened to me, she followed it up and everything has worked out okay."

End of life care and support

- No one was receiving end of life care at the time of our inspection.
- People's future wishes were discussed and recorded.

- Policies were in place to ensure people approaching the end of their life received compassionate care. One relative told us, "The level of care my [family member] received during the last weeks of their life was outstanding."

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 service under the new provider. 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.

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

- There was a clear management structure with clear roles and responsibilities.
- The provider and registered manager were committed to continuous improvement and developed ongoing projects and action plans to achieve this.
- Quality assurance audits were carried out regularly. Audits highlighted areas for improvement, and these were incorporated into action plans which were monitored and completed. The provider accessed monthly progress reports.
- During the inspection we identified one safeguarding concern which had not been referred to the local authority safeguarding team or CQC. The registered manager confirmed this was an oversight and submitted the relevant notifications retrospectively. The incident had been internally investigated appropriately.

We recommend the provider reviews their processes around the notification of safeguarding concerns to relevant organisations to ensure robust reporting procedures are in place.

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

- The service was well-led. The provider and the registered manager had good oversight of the service and created a positive atmosphere within the home. One relative told us, "[The registered manager] is spot on, they all are. It is a really well-run home."
- There was a person-centred culture within the staff team. Staff told us, "The best thing about working here is the people we support" and, "The care people get is the best thing. I have worked in lots of homes and I can honestly say the care here is excellent."
- Staff told us they felt supported and enjoyed their jobs. Comments included, "Management were fantastic during the pandemic. They were reassuring and supportive" and, "The care is good, the registered manager is good, and it is a good company to work for."

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

- The provider and registered manager engaged well with people, staff and relatives. Meetings were held monthly with people who used the service to gather their views and opinions. Feedback was acted upon and changes were communicated back to people.

- Relatives told us they were kept up to date and communication was good. Comments from relatives included, "I have been involved in meetings and appointments regarding [person's] care. I definitely get enough information" and, "Every time I go in, I get updated. They always ring me straight away if there are any problems."
- Regular staff meetings took place and staff told us these were useful. Staff spoke positively about communication within the home, including informative handovers and a daily communication book.
- Staff worked well with other agencies. Timely and appropriate referrals were made to healthcare professionals.

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 provider understood the duty of candour and their responsibility to be open and honest when things go wrong.
- We found the provider and registered manager to be open and honest throughout the inspection process.