

Burlington Care Limited

The Grange

Inspection report

Whinbush Way
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Tel: 01325464900

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29 October 2020

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12 November 2020

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

The Grange accommodates up to 74 people with residential care needs in a purpose-built building. 59 people were using the service at the time of the inspection.

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

People were protected from risks. Monitoring of health and safety procedures and equipment was in place and these systems were well embedded. There were enough staff on duty to meet people's needs. Appropriate arrangements were in place for the safe administration and recording of medicines. Infection prevention and control procedures were in place to reduce the risk of infection and to keep people safe.

The provider and registered manager monitored the quality of the service to make sure they delivered a high standard of care. Professionals we spoke with said the services communicated with them well and they received clear information from staff about people's wellbeing.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 12 May 2020) and there was one breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvement had been made and the provider was no longer in breach of regulations.

Why we inspected

This was a focused inspection based on risk. We carried out an unannounced inspection of this service on 5 and 6 December 2019. One breach of legislation relating to safe care was found. The provider had failed to take steps to minimise the risk of legionella at the service. On this visit we found the service had made improvements and now met all required regulations.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions of Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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 until we return to visit as per our re-inspection programme. If we receive any concerning information 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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

The 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 Care Act 2014.

Inspection team

One inspector carried out this inspection.

Service and service type

The Grange is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. 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

This inspection was announced. We gave the registered manager 48 hours' notice of the inspection. This was to ensure we could visit the service safely.

What we did before the 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.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with the regional manager, registered manager, deputy manager, one senior care staff, two care staff and two healthcare professionals.

We reviewed a range of records. This included three people's care records, health and safety records, various medicines records and two staff recruitment records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

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

At our last inspection, we found the provider had not fully assessed the risk of Legionella within the service. This was a breach of Regulation 12 (1)(2)(h) (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 12.

- The premises were well maintained. Regular checks were carried out to ensure the environment was safe.
- Individual risks were documented and well managed. Risk assessments for the environment, staff and visitors were up to date and regularly reviewed.
- The provider learned from accidents and incidents and undertook robust investigations were needed.

Staffing and recruitment

- The provider had an effective recruitment procedure in place. They carried out relevant security and identification checks when they employed new staff.
- There were enough numbers of staff on duty to keep people safe. People told us, "There is always someone around, they are spot on and you can have a laugh and a joke."

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. The registered manager and staff understood safeguarding procedures and had been trained in safeguarding vulnerable adults.

Using medicines safely

- Medicines were safely managed. Appropriate arrangements were in place for the safe storage, administration and recording of medicines.
- Medicines were administered by trained staff.
- The deputy manager had worked with the pharmacy supplier to ensure medicine records met the needs of the service and to promote best practice.

Preventing and controlling infection

As part of CQC's response to the coronavirus pandemic we are conducting a review of infection prevention and control measures in care homes during our inspections.

- Appropriate infection prevention and control procedures were in place to reduce the risk of infection and to keep people safe.

- Staff had been trained in the use of personal protective equipment (PPE). PPE was readily available for staff and appropriate guidance was in place.

Is the service well-led?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 and registered manager monitored the quality of the service to make sure they delivered a high standard of care. Regular audits were carried out and any identified issues were documented and actioned.
- The registered manager and deputy manager acted in an open and transparent way. They submitted notifications in a timely manner for significant events that had occurred, such as accidents and incidents.

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

- People spoke positively about the quality of the service. One visiting professional we spoke with said, "We get consistent information from the staff and they communicate with us well."
- Staff told us they were comfortable raising any concerns and the management team were very approachable. Comments included, "The support has been great both personally and professionally."

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

- People and family members were able to feedback on the quality of the service. Questionnaires were carried out and any issues raised were responded to. Regular telephone calls and written letters took place with family members who were unable to visit due to the coronavirus pandemic.
- Staff felt involved in the running of the service. They told us the provider kept them up to date with the latest updates and guidance. One staff member told us, "We make sure that via handover and the daily diary that anything relating to people or to changes in guidance around COVID-19 is shared with everyone."

Continuous learning and improving care; Working in partnership with others

- The registered manager and staff worked closely with other health and social care professionals to achieve positive outcomes. This included holding a weekly multi-disciplinary team (MDT) meeting with other healthcare professionals.
- A healthcare professional told us, "Everyone is very settled at The Grange, they follow our advice and plans well."