

Abbeyfield Newcastle Upon Tyne Society  
Limited(The)

# Abbeyfield Residential Care Home - The Grove

## Inspection report

40A The Grove  
Gosforth  
Newcastle Upon Tyne  
Tyne and Wear  
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Tel: 01912852211

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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

Abbeyfield Residential Care Home – The Grove provides accommodation for up to 32 people with personal care needs. At the time of the inspection, 31 people were using the service. Some of the people were living with dementia.

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

People and family members told us the service was safe. Appropriate safeguarding procedures were in place and staff had been trained in how to protect people from abuse. Risks were well managed and the provider learned from accidents and incidents.

The provider carried out appropriate security and identification checks when they employed new staff. There were enough staff on duty to meet the needs of people. Staff were suitably skilled, experienced and supported in their role.

Systems were in place for the safe storage, administration and recording of medicines.

The premises were clean and appropriate health and safety checks had been carried out.

Regular assessments and reviews took place to ensure people's needs were being met. People were supported with their healthcare needs and had access to healthcare professionals when required.

People were supported to have maximum choice and control of their lives, and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

People and family members told us staff were kind and treated them with respect. People were given information in a way they could understand. Staff included people in the care planning process and their preferences and choices were clearly documented in their care records.

Staff protected people from social isolation. People were provided with the opportunity to take part in activities that were relevant and important to them. There were good links with the local community.

People and family members were aware of how to make a complaint and were encouraged to provide feedback. The provider monitored the quality of the service to make sure they delivered a high standard of care.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 14 July 2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

#### 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?

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 ●

# Abbeyfield Residential Care Home - The Grove

## **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

Abbeyfield Residential Care Home – The Grove is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 unannounced.

#### What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals who work with the service. We also contacted 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. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with seven people who used the service and five family members about their experience of the care provided. We spoke with the registered manager, four care staff, the chef and a visiting healthcare professional. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included three people's care records and medicine records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and family members told us the service was safe. Comments included, "Safety? No concerns" and "Very safe."
- The registered manager and staff understood safeguarding procedures. Information about identifying and reporting abuse was available on the notice boards. Staff had been trained in how to protect people from abuse.

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

- The provider learned from accidents and incidents. They made changes to reduce the risk of them reoccurring.
- Risks were well managed. Staff understood potential risks and how to mitigate them.
- The home was exceptionally clean and staff carried out checks to ensure people lived in a safe environment. A family member told us, "The place never smells. Everything is always immaculate."

Staffing and recruitment

- The provider had an effective recruitment procedure in place. They carried out appropriate security and identification checks when they employed new staff.
- There were enough staff on duty to meet the needs of people. Comments from people and family members included, "There are plenty of staff. I think they are all top notch. A lot of them are long standing members of staff" and "The staff have always got time."

Using medicines safely

- Appropriate arrangements were in place for the safe administration and storage of medicines.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Staff carried out assessments of people's needs before they started using the service. Regular assessments and reviews took place to ensure people's needs continued to be met. These included personal care, mobility, skin care and oral health.

Staff support: induction, training, skills and experience

- The provider ensured staff were supported in their role. Staff received regular supervisions and an annual appraisal.
- Staff completed an induction when they began working at the service. Refresher training took place frequently and was up to date.

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

- Staff supported people with their dietary and nutritional needs. Care records described people's individual needs and preferences and how staff were to support them.
- Lunchtime was a pleasant, social event. People were provided with choices and spoke positively about the food.
- The chef told us they had introduced a cookery club for people. The first session had been very popular with people.

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

- Staff supported people with their healthcare needs. People had access to healthcare professionals when required. A family member told us, "They [staff] have a good relationship with the local GP practice."

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

- The premises were appropriately designed and adapted for the people who lived there. Bedrooms were individually decorated and furnished. Most of the people were independently mobile and corridors were clear from obstructions.

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 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager and staff were aware of the need for decisions to be made in a person's best interests if they were unable to make those decisions for themselves.
- Where people were unable to make their own decisions, the proper legal process was followed. DoLS had been applied for where necessary.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 were kind, considerate and treated people with respect. People and family members spoke positively about the caring nature of staff. Comments included, "The staff are lovely. You couldn't ask for nicer people" and "They [staff] are really attentive, they are really caring."
- Staff supported people if they had specific religious or spiritual needs. A monthly church service was carried out at the home for those who wanted to attend.

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

- People's preferences and choices were clearly documented in their care records. Staff included people and family members in the care planning process.
- Advocacy information was available for people if required. Advocates help people to access information and services, be involved in decisions about their lives, explore choices and options and promote their rights and responsibilities. None of the people using the service at the time of our inspection had independent advocates.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and dignity. Staff knocked on doors before entering bedrooms and bathrooms. Family members told us, "They [staff] respect dignity. I've never witnessed anything of concern here" and " There's a really good ethos, a culture of caring and respect."
- Staff supported people to remain as independent as possible. Care records described what people could do for themselves and what they required support with.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 regularly reviewed care records and kept them up to date. They included important information about the person and were person-centred.
- Support plans had clear goals that staff were enabling people to achieve.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff provided people with information in a way they could understand. Records clearly described people's communication needs and their personal preferences.

End of life care and support

- Staff supported people with their end of life care needs. End of life care plans were in place as required and documented people's wishes and decisions.

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

- Staff supported people to live full and active lives. Staff knew people well and understood what was important to them. A family member told us, "I mentioned that [relative] used to like gardening. They are going to get someone in to give a gardening talk. If you have any suggestions, the activities coordinators are brilliant."
- People were protected from social isolation. People and family members spoke positively about the entertainment and activities that took place. A family member told us, "There's always entertainment on."
- On the day of our visit, the provider had arranged for a piper to visit the home to celebrate Burns night. People visibly enjoyed the music prior to their 'Burns lunch'.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy and procedure. This ensured complaints and concerns were acknowledged, investigated and responded to.
- People and family members did not have any complaints but were aware of how to make a complaint.

# 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 good. At this inspection this key question has remained the same. 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager was approachable and promoted a person-centred culture. People and family members told us, "[Registered manager] is lovely, always approachable" and "[Registered manager] is great, very much an open door."
- Staff felt valued and supported in their role. They told us there was a nice atmosphere at the home. Comments included, "I love it. You are made to feel one of the family" and "I enjoy coming to work."
- People and family members were encouraged to feedback on the quality of the service via regular surveys and meetings.

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; Registered managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered 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.
- The registered manager and staff understood their roles and responsibilities. Family members told us communication with staff was good.
- The provider monitored the quality of the service to make sure they delivered a high standard of care.

Continuous learning and improving care; Working in partnership with others

- The registered manager and staff worked closely with health and social care professionals. They worked with a local university to facilitate nursing students and with a local school for work experience.
- The registered manager and deputy manager were undergoing training in mental health awareness. This was to enable them to better understand and support people with mental health conditions.
- The service had good links with the local community. School children were regular visitors and a local supermarket donated flowers to the home. People and family members were supported to access the cycling without age charity and go out for bike rides.