

Highgrove Rest Home Limited

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## Inspection report

88-90 St. Annes Road  
Blackpool  
FY4 2AT

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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

Highgrove Rest Home Ltd is a care home providing personal care to 28 people who live with dementia and mental health conditions. The service can support up to 30 adults and provides multiple communal spaces for people's comfort and enjoyment. Highgrove Rest Home Ltd will be referred to as Highgrove within this report.

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

The registered manager created risk assessments to guide staff in reducing the risk of unsafe care. Staff followed strict infection control measures to ensure a clean, safe environment. One person said, "[Staff] have done very well in keeping the virus out. When I go out, I like to wear a mask and they give me one every time." The registered manager had safe systems to effectively manage people's medicines. The provider had sufficient staffing levels to meet people's needs.

The registered manager ensured staff had extensive training to develop and maintain their skills. 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. The registered manager sought and documented each person's decision-specific consent to care. Staff assessed their nutritional needs and developed care planning to meet their food preferences.

The registered manager and staff created a kind, compassionate and friendly living environment for people's wellbeing. People consistently told us they were treated as individuals and staff respected their human rights. A person stated, "The staff are lovely. They know me and how I like things done."

The management team discussed and developed care planning with each person to tailor support to their individual needs. Staff worked hard during the pandemic to ensure people lived in a stimulating environment that met their social needs. The registered manager provided information throughout the home to help people and their relatives understand how they can raise concerns.

The management team created a caring and welcoming atmosphere to increase everyone's wellbeing. The management team had good oversight of quality assurance to ensure everyone lived and worked in a safe environment.

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

This service was registered with us on 24/03/2020 and this is the first inspection.

The last rating for the service under the previous provider was good, published on 17/03/2018.

### Why we inspected

This was a planned inspection based on the service's registration date.

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 coronavirus and other infection outbreaks effectively.

### 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 ●

# Highgrove Rest Home Ltd

## **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.

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 one inspector.

#### Service and service type

Highgrove 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 unannounced.

#### What we did before the inspection

We reviewed information we held about the service. We sought feedback from the local authority commissioning team. 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 took this into account when we inspected Highgrove and made the judgements in this report. We used all of this

information to plan our inspection.

#### During the inspection

We spoke about Highgrove with three people, five staff and the registered manager. We walked around the building to carry out a visual check. We did this to ensure Highgrove was clean, hygienic and a safe place for people to live. We looked at records related to the management of the service. We checked care and medication records, staffing and recruitment files and quality and leadership oversight systems.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We reviewed the home's quality assurance systems, care documentation, rotas and infection prevention records.

# 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 newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

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

- The registered manager created risk assessments to guide staff in reducing the risk of harm or inappropriate care. They involved people in care planning and managed risk by monitoring the environment closely. One person said, "I love the Highgrove because whenever I am not well, I know I can come here. I know they'll treat me with respect and keep me safe."
- Control measures, such as environmental risk assessments and audits, enabled the registered manager to have oversight of health and safety procedures. This included an analysis of arising issues and discussion with the staff team to learn from and improve the service. People consistently told us they felt safe living at Highgrove.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider had processes to admit people safely to the service.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- 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.

Systems and processes to safeguard people from the risk of abuse

- Staff understood their responsibility to safeguard people from unsafe or inappropriate care. A staff member confirmed, "We have had training and we get updates. I wouldn't hesitate to report concerns, my priority is to protect the residents." Policies guided staff about reporting and whistleblowing procedures.

Using medicines safely

- The registered manager had safe systems to effectively manage people's medicines. This included regular staff training and assessment of their skills on an ongoing basis. A member of the management team audited systems to ensure the continued safety of procedures.
- People confirmed they received their medicines as prescribed, where they agreed for staff to administer them. One person told us, "I was forgetting my tablets, so I much prefer the staff sorting all that out for me. I had a choice, but I knew it was better for them to do it."

### Staffing and recruitment

- The provider maintained sufficient staffing levels throughout the pandemic to meet people's individual needs. One person stated, "They had a lot of staff off with the virus, but they brought in people from elsewhere so that there were still plenty of carers to keep us all safe." Staff were calm, patient and answered call bells in a timely way.
- The registered manager followed safe recruitment procedures in employing suitable staff. This included criminal record checks, references and a review of their full employment history.

# 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.

Staff support: induction, training, skills and experience

- The registered manager ensured staff had extensive training to develop and maintain their skills. This included updating them to current and ongoing guidance about the pandemic. Staff confirmed they were supported to access training to underpin their roles. One person said, "Yes, I believe the staff have a lot of training. I certainly feel confident that they know what they're doing."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The registered manager assessed each person and created support plans to guide staff to meet their needs. Care was geared towards assisting people to maintain their independence and enhance their physical and mental health. One person told us, "When my head's not right, staff come straight up to my room and help me get through the tough times. Couldn't do without them."
- Staff worked closely with community and hospital professionals in the continuity of care. They understood the importance of a multi-disciplinary approach to each person's healthy living.

Ensuring consent to care and treatment in line with law and guidance; Adapting service, design, decoration to meet people's needs

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.

- The registered manager sought and documented each person's decision-specific consent to care. Staff were patient and consistently offered people choice. One person commented, "I have what they call full capacity, so they ask me all sorts of things every day like what do I want for my meals."
- The home had a number of adaptations geared towards maintaining people's independence. This included spacious bathrooms, handrails and wide corridors. People were supported to come and go

without restrictions.

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

- Staff assessed each person's nutritional needs and developed care planning to meet their food preferences. The management team maintained records to check food safety and the kitchen was clean and hygienic. People told us meals were wholesome and they were offered a choice of what to eat and drink. One person said, "The food is really good, we have a great cook and she'll do something different if I don't like the main meal."

# 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.

Respecting and promoting people's privacy, dignity and independence; Ensuring people are well treated and supported; respecting equality and diversity;

- The registered manager and staff created a kind, compassionate and friendly living environment for people's wellbeing. One person stated, "They're great here, really kind and like family." Staff were respectful and determined to support people to retain their independence.
- The registered manager provided equality and diversity training to ensure staff understood the significance of protecting each person's human rights. People consistently told us they were treated as individuals with different needs. One person said, "We're treated as individuals here. They have really got to know us, what we need and how to give that to us."

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

- Care planning was person-centred and showed people were fully involved in decision-making, including when making risky decisions safely. One person explained, "It's a risk for me to go out on my own, but they trust me and help me to do that."
- People told us their views mattered and staff consistently approached care through clear explanation and enabling them to be in control of their lives. A staff member commented, "It's about how you speak with the residents and having a laugh when it's ok to do so."

# 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

- The management team discussed and developed care planning with each person to tailor support to their individual needs. This included their life history, backgrounds and preferences to help staff better understand and engage with people.
- Staff were able to describe people's different needs and why it was essential they responded with a person-centred approach. One person stated, "I watch and I see. All the staff care for us in different ways because we are all different. It's lovely that they do that."

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 worked hard during the pandemic to ensure people lived in a stimulating environment that meet their social needs. The registered manager told us they "had to think out of the box sometimes. We got some eggs and the residents loved looking after four chicks that hatched." People said they enjoyed living at Highgrove and had sufficient activities to occupy them.

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.

- The registered manager assessed people's communication needs. They told us, if required, they would implement systems and equipment to improve each person's engagement.

End of life care and support

- The provider was not delivering end of life care at the time of our inspection. Staff had detailed information about supporting people in an emergency and had also documented their advanced wishes.

Improving care quality in response to complaints or concerns

- The registered manager provided information throughout the home to help people and their relatives understand how they can raise concerns. There had not been any complaints raised about Highgrove over the last 12 months. One person said, "I would go straight to [the registered manager], but there's not one thing I could complain about."

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

- The management team created a caring and welcoming atmosphere to increase everyone's wellbeing. Staff confirmed the management team was supportive and valued them in their roles. A staff member told us, "I get respect and support from [the registered manager], she's great and works with you."
- Without exception, people told us they were happy living at Highgrove. They said the management team and provider were strong leaders and discussed care and the environment with them. One person stated, "[The registered manager]'s lovely, she talks to me on my level and never patronises me." Another person added, "[The provider] is great, he does care and is very supportive. We can talk about things and have mutual respect for each other."

Working in partnership with others

- The management team worked with other health and social care agencies to develop the service and share good practice. For instance, they engaged with the local registered manager's forum.

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; Continuous learning and improving care

- The management team had good oversight of quality assurance to ensure everyone lived and worked in a safe environment. They completed a variety of audits, identified any issues and completed tasks to address them. Staff said they were kept updated to the latest guidance.
- Policies, procedures and documentation had been enhanced during the pandemic. This included continuous reflection on what worked and what did not. A staff member explained, "It's been a very difficult time, but we learned as we went along and kept our focus on our residents. We're a great team and we keep going for their safety."