

Elysium Neurological Services (Adderley) Limited

Adderley Green Care Centre

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?	Outstanding ☆
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Adderley Green is a care home providing personal and nursing care for up to 135 people aged 18 years and over. The home is split across two buildings with each site having their own separate units and separate adapted facilities. One of the sites supports older people some of who may be living with dementia and the other specialises in providing care and support to people with complex neurological care and rehabilitation needs.

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

People received an exceptionally consistent and responsive service that was tailored to meet their individual needs, and which gave them opportunities to improve physically and mentally in order to live as independently as possible.

People were supported by a dedicated and committed staff team who were passionate about putting people at the centre of their own care creating and meeting ambitions, goals and aspirations together.

Staff knew people extremely well and knew people's limitations whilst being able to effectively support and motivate people to take part in rehabilitation programmes personalised to them to achieve positive outcomes.

Staff were trained to a high standard which meant people received high quality care that was appropriate and individualised to them. People with specific and complex needs had these met in an effective and timely way. The provider had a comprehensive training programme for staff to access which meant more staff were trained to effectively deliver care and support to people.

People were kept safe from the risks of harm and abuse. Staff knew how to recognise and respond to concerns of abuse and people had risks assessments in place to guide staff to mitigate risk.

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 were caring and treated people as individuals responding to people's preference and choice. People knew how to make a complaint and felt assured complaints and issues raised would be responded to accordingly.

The management team were dedicated to promoting an inclusive culture where people and staff were respected and valued.

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

Rating at last inspection

The last rating for this service was good (published 20 June 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?

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?

Outstanding ☆

The service was exceptionally 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.

Adderley Green Care Centre

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

The inspection was carried out by three inspectors and two Experts 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

Adderley Green 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.

Notice of inspection

This inspection was unannounced.

What we did before 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. We used all of this information to plan our inspection.

During the inspection

We spoke with 13 people who used the service and 8 relatives about their experience of the care provided. We spoke with 10 members of staff including nurses, therapists, senior care staff and care staff. We spoke with the registered manager, the quality assurance manager and a clinical lead.

We reviewed a range of records. This included 7 people's care records and multiple medication records. 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 living at Adderley Green told us they felt safe and comments we received included, "I feel safe because the staff have the knowledge to support me" and "Staff are always on hand to keep me safe."
- Staff were trained to recognise and respond to safeguard concerns and told us how they would report these in line with the providers safeguarding policy.
- The clinical leads had received advanced safeguarding training to enable them to internally provide the programme of training for all other staff.

Assessing risk, safety monitoring and management

- People's risks were assessed, and plans were in place for staff to follow to enable them to keep people safe from the risk of avoidable harm.
- Staff received specific training and guidance about people's specific health conditions. For example, staff knew to support people with tracheostomy care and any of its associated risks.
- Staff knew people's needs well and told us what actions they took to protect people and mitigate the risk of harm.

Staffing and recruitment

- The provider had systems in place to monitor and manage the number of staff available to support people and this was reviewed daily. Staff ratios were displayed on each unit throughout the service to allow people, their relatives and staff to know who was on duty for that day.
- All new staff received a full and comprehensive induction. Staff were given standardised and specialised training dependent on the needs of people they were supporting.
- Staff were recruited in a safe way. The provider ensured potential employees were subject to recruitment checks to determine their suitability to work with people.

Using medicines safely

- People told us they received their medicines on time and in a safe way. Processes were in place to ensure medicines were stored, recorded and administered in line with best practice guidance.
- Protocols were in place to guide and support staff when administering 'as required' medications and homely remedies.
- Systems were in place to audit when and how people had their medicines administered to reduce the risk of errors occurring. Where errors had been identified, these were able to be dealt with in a prompt and efficient way. Staff received regular checks to ensure they remained suitable and competent to administer medicines.

Preventing and controlling infection

- Staff wore personal protective equipment to mitigate the risk of the spread of infection.
- The environment was clean and free from malodour.

Learning lessons when things go wrong

- Senior members of staff including clinical leads and the quality assurance lead were responsible for completing audits to monitor the effectiveness of the service.
- There was a reporting mechanism in place to highlight and address shortfalls. Where issues were identified, actions were taken to reduce the risk of reoccurrence.

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

- Pre-assessments were completed before people moved to Adderley Green to ensure their needs could be met.
- People received a thorough assessment of need where their goals and aspirations were identified and planned for.
- These assessments contributed to detailed care plans which were devised to guide staff to support people effectively in line with their wishes.

Staff support: induction, training, skills and experience

- Since the last inspection, the induction process for new staff had developed and progressed to include more training, designed to assist new staff to effectively support people with a range of holistic needs. A member of staff told us, "The training I have had is excellent and I am being supported to hopefully, next year obtain a nursing qualification."
- There was a comprehensive training programme available for all staff and additional training was available for staff to develop their skills and knowledge in relation to specific needs such as dementia and neurological care.
- Staff told us they worked well together and supported each other to ultimately provide better care for people. One staff member said, "Our place of work is huge, but with everyone's input, it just works."

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

- People were supported to receive a balanced diet. However, we received mixed reviews about the quality of food people received. Some comments we received included, "The food is suitable and varied but there could be improvements made in relation to quality and choice", "The food is hit and miss; sometimes the food is dry because it is kept in a heated trolley". Other comments we received included, "The food is great, and staff know what I like" and "I enjoy my food here."
- Plans were in place for people who had specific nutritional needs and staff were observed supporting people in line with their care plans to have their dietary needs met.
- The provider recognised the importance of maintaining people's health through adequate fluid intake and was in the process of introducing hydration training for all staff.

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

- The provider employed internal health care professionals such as speech and language therapists, clinical psychologists and physio and occupational therapists to support people on-site as and when they required.

- The registered manager had developed and maintained good working relationships with external agencies and organisations such as G. P's and tissue viability nurses to continue to enhance good quality outcomes for people.
- Best practice initiatives were used to promote people's health and well-being. For example, staff used a national early warning score system to assess and respond to clinical deterioration in people's needs thus improving better outcomes for people and reducing the need for hospital admission.

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.

- People were given choice and control to make decisions where they were able. Where people lacked capacity, staff supported people to maximise their decision-making ability.
- The registered manager had applied for DoLS authorisations on behalf of people who were unable to make specific decisions in relation to their care needs and accommodation at Adderley Green.
- Staff were issued with aide memoires to wear on their identification lanyards detailing the principles of the mental capacity act. Staff demonstrated they were aware of such principles and told us, "Just because some of our residents cannot say what they want, it doesn't mean they do not know. We have to help them to maximise their ability to be able to make and communicate decisions." Another staff member said, "It is about helping people to make decisions for themselves."

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

- The purpose-built environment met the needs of the people living at Adderley Green.
- Specialised equipment and treatment rooms were available to effectively meet people's individual needs.
- Reminiscence therapy was encouraged through rooms that were created and often named to replicate the local and neighbouring towns. This included a local pub, a jewellery and toy shop that were decorated to mirror the original buildings.

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

- People and their relatives told us they were treated extremely well by a staff team who were kind, caring and compassionate.
- Feedback we received included, "The staff are so good, I really do not have a bad word to say about any of them", "Staff are exceptional" and "Everyone is generally happy here; If I had to ever come into a home, I would definitely put my name down to come and live here."
- Staff had developed positive relationships with people which were based on trust and patience. We observed staff speaking to people in a reassuring and calm way. Time was taken with people to allow them to express themselves and in turn, receive the care and support they required.
- The registered manager understood their responsibility in relation to meeting people's needs associated with their protected characteristic under the Equality Act 2010. This included people's needs related to religion and sexuality. The staff team held a 'cultural day' every month, exploring different cultures from around the world. This reinforced the importance and, increased the awareness of equality for everyone living at the service and celebrating diversity.

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

- People and their relatives were encouraged to provide feedback about the service through regular meetings.
- Minutes collated from the meetings were analysed by the registered manager in an effort to address issues and suggestions that were raised. For example, relatives had fed back that they were unable to access the buildings and were often left waiting to see their relatives. As a result, relatives were issued with a fob to allow them access into the specific units where their relatives resided reducing the need to wait for staff to respond to the request for entry.
- Care reviews were held on a monthly basis where people were encouraged to attend where able. This gave people the opportunity to contribute to their care planning.

Respecting and promoting people's privacy, dignity and independence

- People told us staff respected their dignity and privacy and we observed this in practice during our inspection. One person said, "The staff have always respected my dignity and privacy."
- Staff told us how they ensured they preserved dignity for people by covering them with towels when supporting with personal care, knocking on doors and closing doors and curtains to give people privacy.

- Promoting independence was a driver for staff, particularly for those people who were in receipt of rehabilitation with long term goals to return into the community. We heard of and saw many examples of people being encouraged and supported to maximise their independence and reach their own desired objectives.

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 now improved to Outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; 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 received a service that was truly individualised and tailored to meet their often complex needs. People were central to their care planning and staff went above and beyond to identify dreams and aspirations to set goals and objectives for people to encourage and drive independence.
- Records evidenced people's progression as a result of specific, measurable and realistic care plans. We were shown video evidence of one person receiving a full rehabilitation programme that enabled them to go from being immobile to learning to waltz for their wedding dance. Another person experienced a brain injury that meant they were unable to weight bear or mobilise. Their care plan documented their expressed wish to be able to give a relative a standing hug. With exceptionally planned person-centred care that included guidance and support from a range of multi-disciplinary professionals, the person was able to achieve their goal and made their wish a reality. We were told of and saw photographs of the experience.
- Staff empowered people to realise their strengths and potential and overcame limitations to enable them to reach their desired outcomes. For example, one person had been given minimal chance of survival after experiencing a neurological illness which was compounded by a rare genetic condition. The person was admitted to Adderley Green, unable to walk or speak. Through taking a multi-disciplinary approach and by setting small and realistic tasks for the person and building relationships and gaining trust, staff were able to support the person to mobilise with the aid of a stick. Music therapy sessions had been introduced to enable the person to work on vocalisation whilst speech and language therapists (SALT) spent time developing non-verbal communication methods to suit the person. A physiotherapist said, "Working with [Person's name] has been both challenging but highly rewarding. It has been a steep learning curve adapting our treatment methods to make things possible for [person's name] when they have previously been told 'no' by other healthcare professionals. They are a perfect example of how with determination and being innovative, anything is possible."
- Staff had positive attitudes, and this was evidently key to the improvements seen in people's health and well-being. People and their relatives told us of staff 'going the extra mile' and 'providing care that exceeded expectations'.
- People told us that staff behaviours and attitudes enhanced their well-being and independence. One person said, "The therapy staff have had so much patience with me; the way staff have been is just great." A relative said, "The staff are consistent and [name of person] has improved greatly since they have been here. The staff set achievable targets and we have a three-month review. There is good communication and they [relative] has their life back; their quality of life is so much better." Another relative told us, "The occupational therapist and all the staff have been so brilliant; they make us all feel so welcome when we

visit; what they have done with [name of person] is great and they are now fit enough to be coming home to us."

- The culture throughout the service was one that promoted the importance of enabling people to live their lives as they wished. This meant staff had to think creatively to meet people's needs and wishes. One person had been unable to eat and drink following a brain injury and it was their desire to regain the ability to do this. The professionals involved in the person's care commenced extensive oral trials including the use of real-time x-rays to evaluate the person's ability to swallow effectively and safely whilst SALT worked to improve oral motor control and swallowing. The collaborative approach using innovative methods meant the person was now able to eat a minced and moist diet tolerating thickened fluids.
- People and staff worked together to identify specific and customised activities to aid rehabilitation. People were given opportunities to participate in meaningful activities to support and enhance recovery. We saw examples of people engaging in a range of therapies such as art and music therapy. One person's mental health and well-being had improved through their participation in music therapy which enabled the person to listen to music in their first language which was not English.
- The staff team at Adderley Green recognised the importance of positive relationships with people's relatives and friends and the impact this had on people.
- People were encouraged to spend as much time with their loved ones as they wanted, and families were invited to observe rehabilitation in progress. One relative told us, "This is a much better place for [name of person] at this time because it has allowed me to be a spouse again. We are seen as family and staff get a holistic view. We are still able to make family memories here with our [relative]; we have takeaway nights together and we still spend time as a family which is really important to us."

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 were committed to enabling people to gain independence through communicating effectively. They embraced and explored innovative ways to enable people to express their needs and preferences.
- Technology was used in a creative and imaginative way to provide people with information and to enable people to take ownership of their care routines. One person was identified as needing support to improve cognitive functioning and with their processing speed. They were given access to an iPad to access a range of rehabilitation exercises and to follow their care routine in a way that was clear and understandable for them.
- The registered manager demonstrated an awareness of the AIS and shared examples of how staff were supportive of people who had additional communication needs. The registered manager told us, "Menus are pictorial, and we use talking mats. We have people who use voice assisted technology and we encourage the use of artificial intelligence devices for people; we have even supported a person who used eye gaze technology to allow them to watch television."

End of life care and support

- People's end of life care wishes, and preferences were discussed with people and recorded in their care planning documentation.
- A relative shared their experience of the support they received as a relative reached the end of their life. They told us, "The care we received was out of this world; absolutely amazing. We were continually supported and asked if there was anything else staff could do to help us at a very important time of our lives. I really could not have wished for anything better and the support we received has given me the strength I require to deal with my loss."

- Clinical staff were given the tools and resources that were required to appropriately support people who were at the end stages of their life. A staff member told us, "I have received syringe driver training as part of the on-going learning for end of life care."

Improving care quality in response to complaints or concerns

- The provider had a complaints process in place which people, relatives and staff were able to access. When formal complaints had been received, the registered manager had responded in accordance with the policy.
- People told us they felt assured complaints would be responded to and knew key individuals within the service to whom they could direct their complaints.

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

- People told us they felt the registered manager and their team were always visible around the home and were approachable.
- The registered manager was consistent in their approach to providing high-quality care and was committed to driving improvement and promoting better practice to achieve the best outcomes for people.
- The senior management team led by example and demonstrated the same ethos to improving care. The registered manager told us, "I have an open-door policy for people and staff to talk to me and I am honest with them. I tell staff I want people looking after as if they were their own family; if they don't want to be the best, don't come to work. I believe the residents deserve high quality care and it is not just lip service; I make sure that is what the residents get."
- The senior staff team spoke highly of the provider's senior management team and told us they were visible and always on hand. The registered manager said, "We can pick up the phone to anyone for advice. The Chief Executive Officer has recently visited us, and they are coming back in December. The regional manager was also here just yesterday." This demonstrated the provider was committed to living their own company values.

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 senior staff team understood their responsibilities in meeting the duty of candour. The registered manager said, "We tell the truth and admit it if we have done something wrong."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- There were mechanisms in place to measure the quality and the effectiveness of the service. The quality assurance manager worked with the clinical leads to undertake audits on a regular basis ensuring people received consistent care and any concerns, errors and shortfalls identified were addressed in a timely way.
- Senior clinical governance meetings were held regularly to discuss and review information and outcomes from regional and corporate meetings. This information was fed back down through lines of manager delegation to ensure practice was improved at service level.
- The registered manager acted in accordance with their registration with us, providing us with key information about the service as events happened, as required by law.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Regular resident and relative meetings were held to gain feedback about the service. This information was used as a driver for improvement. Staff were also asked to contribute to the running of the service through meetings and individual supervisions.
- A monthly newsletter was produced to keep people, their relatives and staff up-to-date with events and improvements within the service.
- Staff received a variety of incentives to support them in their work. For example, staff were given the day of their birthday off work with full pay and complimentary therapies were available for staff to enjoy such as massage and reflexology. This demonstrated the provider valued its workforce and recognised the importance supporting staff to improve the care and support people received.
- The registered manager spoke with us about best practice initiatives they used to continually improve their practice. They said, "You have got to improve as if you don't you stand still then you go backwards. We welcome feedback from staff and people who come into the service and we are keen to hear new ideas. People who use our service are constantly challenging us, so we have to be innovative to keep going because rehabilitation is a slow progress and can take a long time. We can keep people's bodies going but we need to keep their minds going too."

Working in partnership with others

- The staff team had developed good community links with outside organisations to benefit people living at Adderley Green. There were links with local schools and places of worship. The provider was considering sponsoring a local sports team for both benefit to the sports club whilst raising the profile of the provider and Adderley Green.