

Care UK Community Partnerships Ltd

Elwick Grange

Inspection report

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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

Elwick Grange is a residential care home providing personal care for up to 60 people. The service provides support to older people, some of whom were living with dementia. At the time of our inspection there were 59 people using the service.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

People, relatives and staff gave positive feedback about the care provided. The provider had systems in place to ensure people were protected from the risk of abuse and harm. Staff completed safeguarding training.

Risks to people were assessed and managed. Incidents and accidents and safeguarding concerns were recorded and analysed, with the information used to drive improvement. People's medicines were managed safely.

People lived in a safe environment. Health and safety checks were regularly conducted.

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 provider had comprehensive quality assurance systems to monitor the quality of the service. People, relatives and staff were regularly asked for feedback. The culture of the home promoted positive outcomes for people.

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 good (published 7 February 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service remains 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 Elwick Grange on our website at www.cqc.org.uk.

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?

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.

Elwick 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

An inspector and an Expert by Experience carried out this inspection. 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

Elwick 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. Elwick 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 home 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 (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 5 people and 4 relatives about their experience of the care provided. We spoke with 9 members of staff including the registered manager, the deputy manager, 4 care staff and 3 support staff.

We reviewed a range of documents relating to the safety and management of the home.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. One person said, "You get well looked after; you feel safe."
- Systems were in place to protect people from the risk of abuse and harm. Staff had completed safeguarding training.
- Safeguarding concerns were investigated and reported to the appropriate authorities. A safeguarding concern was identified during inspection, the registered manager immediately took action to reduce the risks posed and conducted an investigation with learning points shared with staff.

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

- Individual and environmental risks had been identified and managed. Risk assessments were in place to support staff to help people to remain safe.
- People lived in a safe environment. Health and safety checks were regularly completed. Personalised plans and equipment were in place to support people in an emergency.
- Information from safeguarding, accidents and incidents were analysed and where necessary, changes were made to reduce the impact on people.
- The provider used information from all their services to learn and improve. Data from accidents and incidents, safeguardings and clinical information was gathered with learning points cascaded across the services.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

- The home was working within the principles of the MCA.
- The registered manager had submitted DoLS applications to the local authority for review/authorisation in line with legal requirements.

Staffing and recruitment

- Enough staff were deployed to meet people's needs. The registered manager regularly reviewed staffing

levels and staff were allocated duties daily.

- The provider had a robust recruitment process. Pre-employment checks had been completed to ensure that new staff employed were suitable to work at the home.

Using medicines safely

- Medicines were managed safely. The provider followed safe protocols for the receipt, storage, administration and disposal of medicines. Regular audits were completed.
- People received their medicines as they preferred. Care plans outlined how people wished to take their medicines. One person said, "I get information about the tablets."

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 meeting shielding and social distancing rules.
- 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 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.
- The provider was preventing visitors from catching and spreading infections.
- Visiting was in line with government guidelines. No restrictions were in place and visits took place during the inspection process.

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 our last inspection we rated this key question good. The rating for this key question has remained 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

- The provider had a strong ethos for people to lead fulfilling lives. Staff supported people in maintaining links with the local community, their interests and developing new skills.
- Staff were enthusiastic and knowledgeable about their roles. Staff worked well together and promoted an open culture. We observed many happy interactions between staff and people.
- People, relatives and staff told us the registered manager was approachable and supportive. One relative said, "The staff are approachable, and the home is well managed," and "The manager's door is always open."

Continuous learning and improving care; working in partnership with others

- The provider promoted continuous learning. Systems were in place to support the management team to reflect and evaluate all areas of the home. Positive learning was cascaded across all the provider's services.
- The provider valued staff. Staff had opportunities of career progression and performance was recognised and rewarded.
- The home promoted a holistic approach in supporting people. The home had introduced 'Namaste' a sensory experience for people, which looked at touch, sound and smell. Some people who declined communal activities embraced the experience.
- The home worked closely with health and social care professionals to ensure people received joined up 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 had a comprehensive range of quality assurance systems. These were effective in monitoring the quality of the home.
- The registered manager had submitted the required statutory notifications to CQC following significant events at the home.
- The provider and registered manager understood the duty of candour. The home had an open and transparent culture.

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

- People and relatives were encouraged to give feedback about the home. The registered manager had reintroduced face to face relatives' meetings. A feedback notice displayed what actions were taken following survey results.
- Staff had opportunities to express their opinions in team meetings and supervisions. One staff member said, "We can go to [the registered manager] with anything."