

## Signature of Reigate (Operations) Limited

# Reigate Grange

### Inspection report

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Date of inspection visit:  
26 June 2019

Date of publication:  
08 August 2019

### 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

Reigate Grange is a residential care home providing personal and nursing care to 47 people at the time of the inspection. The service can support up to 87 people. The service is purpose-built and provides accommodation and facilities over three floors. The second floor provides care and support to people who are living with dementia, this area is called Hilltops. The other areas of the home provide care for people requiring 'assisted living'. Some people lead a mainly independent life and use the home's facilities to support their lifestyle.

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

People were supported by a caring and compassionate staff team. The care provided was highly personalised and put people's choices and preferences at the centre of how support was provided.

There was a wide and diverse range of activities available which were meaningful and reflective of people's preferences. Opportunities to continue to pursue hobbies and interests were created. Care records were detailed and contained comprehensive information regarding people's life histories, needs and preferences. This included information on the support people wanted when approaching the end of their life. Communication care plans had been developed to ensure staff were aware of how to communicate with each person effectively. Complaints were responded to in a timely manner and actions implemented to ensure the same concerns did not arise again.

People's independence, privacy and dignity were respected by staff. People told us they enjoyed the food provided and their feedback was listened to. There were a variety of forums to enable people to share their views and make suggestions regarding the running of the service.

Risks to people's safety and welfare were monitored and support provided to minimise risks. People received their medicines in line with prescription guidelines. Health professionals were involved in people's care where required. People lived in a well-designed environment which was developed in line with their requirements. Staff were observed to have time to spend with people and were attentive to their needs.

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.

There was a positive staff culture and this was reflected in a happy and friendly atmosphere. People, relatives and staff felt listened to and well supported. Quality assurance processes were in place to monitor the service provided. The provider and registered manager were committed to ensuring a culture of continuous improvement.

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 02/07/2018 and this is the first inspection.

#### 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 exceptionally 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.

# Reigate 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

The inspection team consisted of three inspectors, a specialist nurse with experience of this type of care setting and an Expert 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

Reigate Grange 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

Prior to this inspection we reviewed all the information we held about the service, including data about safeguarding and statutory notifications. Statutory notifications are information about important events which the provider is required to send us by law. We used information the provider sent us in the Provider Information Return. Providers are required to send us 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

As part of our inspection we spoke with 10 people who lived at Reigate Grange and four relatives. We observed the care and support provided to people. We also spoke with the registered manager, regional manager, 11 staff members and a visiting health care professional. We reviewed a range of documents about people's care and how the home was managed. We looked at seven care plans, five staff files, medication administration records, risk assessments, policies and procedures and internal audits that had been completed.

#### After the inspection

Following the inspection, we reviewed additional information requested from the provider including staff training records and further audit information.

# 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.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt safe living at Reigate Grange. One person told us, "I do feel safe here, it's a very good place." One relative told us, "The Home is very secure."
- The provider had implemented policies to protect people from the risk of abuse. Where concerns had arisen, these were appropriately reported to the relevant authorities. Any information requested by the local authority had been provided in an open and transparent manner. This ensured that appropriate action was taken and lessons learnt to prevent further incidents.
- Staff had received safeguarding training and were able to describe their responsibilities to keep people safe from harm. One staff member told us, "I would report any abuse to the management, social service and to the CQC." A second staff member said, "We know our residents very well. We would report it if anything was different or they told us something was wrong."

Assessing risk, safety monitoring and management

- People told us if they needed help to stay safe staff would support them. One person told us, "We don't need much help to move about but when we do we get it."
- Risk management plans were detailed and covered areas including mobility, falls, nutrition, skin integrity and where appropriate, specific health conditions. Control measures to mitigate risks had been implemented and contained relevant and detailed guidance for staff on how to keep people safe.
- Where people's anxiety and behaviours were a risk to them or others, detailed guidance was provided for staff on how to pre-empt concerns and provide reassurance.
- People lived in a safe and well-maintained environment. Maintenance staff were employed to ensure any repairs were completed in a timely manner. Regular safety checks were completed and equipment was serviced at the required intervals
- Emergency protocols were in place which included personal emergency evacuation plans (PEEPS) for each person living at the service. This provided guidance for staff and the emergency services on the support people would need to leave the premises in the event of an emergency. A contingency plan had also been developed to ensure that people would continue to receive the care they required should services be disrupted.

Staffing and recruitment

- People told us there were sufficient staff deployed. One person told us, "There are enough staff. It's rare that I have to wait when I press my button." Another person said, "Enough staff and I've always got help when I've called for it." One relative said, "There are plenty of staff and they are all very caring."
- We observed that people's requests for support were responded to quickly. Staff had time to spend time

with people socially which created a relaxed atmosphere throughout the service. Staff told us they felt there were enough staff to provide personalised care. One staff member told us, "There's enough staff for that, if you see someone sitting on their own, you can go and have a chat, you can give them some companionship. You get to know people really well."

- Staff were allocated to a specific area of the home which meant they supported the same people and worked with the same staff team. This provided consistency for both people and staff team.
- The use of electronic recording of people's care meant the provider could accurately monitor the staffing levels. The registered manager told us this enabled them to be responsive in how staff were deployed, "We now have varied shifts so those pinch-points such as mornings and twilights are covered."
- Safe recruitment processes were in place. Checks were completed on prospective staff to ensure as far as possible they were suitable to support people. These included references and Disclosure and Barring Service (DBS) checks and obtaining references.

#### Using medicines safely

- People and their relatives told us their medicines were managed well. One person said, "They look after my medication and I get it when I need it." One relative told us, "Her medication is kept in her room under lock and key. They (staff) pre-empt her medication needs and resupply."
- People's medicines were securely stored in locked cabinets within their rooms. One staff member told us they felt this was a more personalised way of supporting people with their medicines, "It's more person-centred. Also, you can give them their meds in the privacy of their rooms as opposed to a communal area or other open space." People who were able to manage their own medicines were supported to do so safely.
- Staff received training and their competency was assessed prior to them administering medicines. Safe medicines processes were followed and people received their medicines in line with prescription guidelines.

#### Preventing and controlling infection

- People lived in a clean environment. One person told us, "They clean my room every day. It's a very clean place."
- Staff understood their responsibilities in protecting people from the spread of infection. Staff told us they always had access to person protective equipment such as gloves and aprons. Training in infection control processes was completed by staff and regular audits of staff practice were completed.
- Cleaning schedules were in place for tasks required on a daily, weekly, monthly and annual basis and records showed these were followed. The laundry area was organised with clearly designated areas for clean, dirty and soiled laundry

#### Learning lessons when things go wrong

- The provider had a system in place to monitor and review all accidents and incidents in order to identify if the required action had been taken to minimise the risk of them happening again.
- Records showed that one person had experienced a number of falls. The person had been referred to the falls team for advice, their medicines reviewed, furniture re-arranged and additional checks implemented so staff could anticipate the persons needs. These actions had led to a decrease in the number of falls the person experienced.
- A review of accidents and incidents was regularly completed to identify any themes or trends to identify any areas of improvement. As a result of this and through listening to people's views, pendant alarms had been provided to those at risk of falls. This had led to people feeling reassured by being able to summon support quickly wherever they were in the building.



# 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.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were holistically assessed prior to them moving into Reigate Grange to ensure they could be met. A one-page profile of the person was then developed and shared with the heads of each department. This was then shared with all teams before being added to the person's care plan. The profile contained information which was important to the person and an overview of their care needs. This helped staff to welcome the person to Reigate Grange, to generate conversation and to introduce people to others with similar interests.
- Assessments of people's needs were periodically reviewed and amended as their needs and preferences changed. Nationally recognised tools were used to monitor people's health and well-being on an on-going basis such as malnutrition screening.

Staff support: induction, training, skills and experience

- People and their relatives told us staff were trained to carry out their roles. One person said, "Staff seem very capable at their work." One relative told us, "Staff seem well trained."
- Staff told us they received an induction and training when they began working at Reigate Grange which included the opportunity to work alongside more experienced colleagues. One staff member said, "I had all the training I needed and quite a few shadowing shifts as well."
- Staff were supported to complete the Care Certificate during their induction process and their competence in providing care was assessed and monitored. The care certificate is a set of agreed standards that health and social care staff should demonstrate in their daily working lives.
- On-going training and refreshers were provided to staff to ensure their learning remained current. Training was provided in areas such as dementia and diabetes to ensure staff had the specific knowledge they required to support people's individual needs.
- The registered manager maintained a supervision matrix which showed staff received regular supervision to support them in their roles.

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

- People told us they enjoyed the food provided and their choices were respected. One person said, "The food is excellent. There's plenty of snacks to be had, you can get it yourself or they will bring it to you." One relative told us, "They accommodate her eating desires and she eats in her room from choice."
- People were able to eat in the main restaurant, bistro area or in their rooms depending on their preference. Hospitality staff were aware of people's individual needs and preferences and were attentive to their requirements. Staff ate their meals with people dining in Hilltops which created a relaxed atmosphere

where people and staff were chatting and laughing together. Where people required support to eat this was provided at their own pace.

- People's individual preferences were catered for. The catering manager told us, "We take on feedback from the residents and respond to them. A lady asked for a lamb chop and we put this in the menu the next day. When people ask for foods which are different we are quick to change or adapt to their requests." One person liked to have a beer each day. When they needed to use a thickener in their drinks due to swallowing concerns, staff found a type which could be used safely with alcohol.
- Assessments had been completed for people at risk of malnutrition regarding how and when they preferred to eat. For some people this meant ensuring mealtimes were a social occasion and for others this meant providing regular small meals and snacks. Where people did require food supplements staff liaised with them and the GP to find the right one for them. People were weighed regularly and any significant variances were discussed with relevant health professionals.

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

- Reigate Grange is a large purpose built service which was designed with the needs of people specifically in mind. There were a range of room and suite options available which meant people could continue to live largely independent lives if they chose to.
- Lifts were available to all floors. Hallways and doors were wide giving people using wheelchairs or mobility aids access to all areas of the service. Adapted bathrooms were available where required.
- Hilltops was designed to meet the needs of people living with dementia. There were several lounges which meant people could choose to sit in a quiet or busier environment. Clear signage and different colours had been used to depict the use of different areas. Memory boxes were placed outside people's rooms containing item such as ornaments, medals and photographs which were important to people to help them identify their own room. There was a large terraced outdoor seating area which people were using during the inspection.
- There was a range of communal areas including a restaurant, bistro, lounges, cinema and activities room. A private dining room was also available for private functions for those wishing to entertain friends and families. Drinks and snacks were available in the reception area which had become a central hub for people to meet and to receive visitors.

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

- People were supported to access healthcare professionals as required. One person told us, "They would get the GP without question." Another person told us, "They organised a visit from the chiropodist".
- Records showed that referrals had been made to the GP and other healthcare professionals such as the falls team, dieticians and physiotherapists in order to help people maintain good health. Where people required support to attend appointments this was provided by staff and accurate records maintained. Advice from healthcare professionals was followed such as supporting people to follow recommended diets and prompting people to complete exercise routines.
- Systems were in place to support staff in providing consistent and effective care. Staff were part of a handover at the change of shift. This provided the opportunity to discuss how people had been and any changes in people's needs. The registered manager also met daily with the heads of department to discuss any developments and any actions for the day. Information arising in the meetings was shared with staff where appropriate.

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's legal rights were protected as the principles of the MCA were followed. Decision specific capacity assessments had been completed in areas including key padded exit doors from certain areas of the service, medicines and if people wanted staff to check on them during the night.
- Where people had been determined to lack capacity to make certain decisions, best interest decisions were discussed with family, staff and healthcare professionals as appropriate. People's opinions were taken into account when making best interest decisions and the least restrictive options were considered. For example, one person was known to leave the service with no destination in mind. Rather than try to stop the person, staff would accompany them and return when the person was ready to do so.
- DoLS applications were submitted where restrictions on people's liberties were in place. The registered manager maintained and reviewed a DoLS register and ensured that when re-applications were required these were submitted.

# 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.

Ensuring people are well treated and supported; respecting equality and diversity

- People and their relatives told us that staff were consistently caring and kind in their approach. One person said, "Staff are kind and attentive and always polite." A second person told us, "Staff are very helpful and always popping in to see how we are." One relative told us, "I can't fault the care here, it's outstanding. They look after Mum so well. All the staff are amazing and they look after me as well."
- We observed staff supporting people with kindness and compassion and encouraging them to support each other. During our inspection staff and people living at Reigate Grange received some upsetting news. Staff ensured people had privacy and gave reassurance by putting their arms around people and listening to them. There was a feeling of community in how people and staff came together to share their feelings.
- Staff were attentive to people's needs and provided reassurance when people appeared anxious. One person was concerned they couldn't find their favourite cardigan. Staff took the person's hand and asked if they could help them go and have another look. We later saw the person wearing their cardigan, smiling and sharing a joke with the staff member.
- People's diversity and religious beliefs were respected. Links with local places of worship were in place and where people requested support to attend services this was provided.

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

- People and their relatives were fully involved in their care. One person told us, "I have a good amount of control in how I am cared for. The staff are good at working with me and doing what I ask." One relative told us, "We are involved in decisions about Mum's care. The care is excellent."
- People were involved in decisions regarding all aspects of their care. This included the completion of regular reviews to check if there were any changes people wanted to make to the support they received. Hospitality staff knew people's likes and preferences well from ensuring they always sought their feedback. When moving into Reigate Grange, domestic staff met people to agree when and how often they would like support to clean their rooms.
- During the inspection we saw people were constantly offered choices and asked if they needed anything. Staff informed people of the activities available and gave people choices regarding how they spent their time.
- Staff supporting people living in Hilltops understood the need to follow people's preferred routines whilst still offering choice and flexibility. One person's records showed they preferred to have their breakfast before getting ready for the day and we saw this was done. When the person indicated they were not yet ready to go back to their room to get dressed staff respected this and returned a little while later to provide their support.

## Respecting and promoting people's privacy, dignity and independence

- People told us their privacy and dignity was respected and they were able to maintain their independence where possible. One person told us, "I have retained my privacy and dignity here. Every time they come here (persons room) they knock before coming in." A second person told us, "We do feel we have a certain amount of independence, but help is always there."
- Staff demonstrated understanding of how to provide people's care in a respectful way. One staff member told us, "We always close the door when we give care. We also cover them with a towel if necessary, and we ask them if they want a male or female carer. Based on what they can do we consider what they need us to help them with. This means that they can do more and be happier themselves."
- People were provided with the equipment they required to maintain their independence. This included adapted crockery and cutlery to support people to eat independently and aids and adaptations to aid people's mobility.

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

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 an exceptionally personalised service from a staff team who were dedicated to responding to people's individual interests and friendships.
- People were highly complementary about the standard and variety of activities provided. One person told us, "There's a good programme of activities and they put on things which are very worthwhile." A second person told us, "There is a good programme of activities and we can choose to attend or not. We have trips out and entertainers come in." One relative told us, "She gets an entertainment sheet every week and they give her the choice about attending. They also give her the choice of doing things, like making teas in the bistro."
- There was a large and diverse range of activities available which included varied trips, gardening groups, quizzes, film evenings, flower arranging, visiting speakers and entertainers. Although a dedicated activities team were employed, all staff took part in activities. This created a relaxed and fun environment and ensured people and staff shared experiences and interests.
- Staff ensured activities of particular interest to people were developed. Examples of this included holding a country and western day as one person enjoyed country music. This involved decorating the bistro area, line dancing and a live country and western singer. The person was involved in choosing the music and advising on different aspects of the day. Photographs showed how much the person had enjoyed the event and their contribution to it. Another person had spent their life around horses. Staff arranged a trip to the local stables where the person was able to spend time with the horses and watch the lessons. The person shared many stories of their past experiences with staff.
- Where people were reluctant to join activities, staff were attentive to things they enjoyed in order to create more opportunities. One person who did not very often join others socially had enjoyed a virtual reality experience from a visiting company. Activities staff had booked the session again as they understood this was an opportunity for the person to join others and share their experience. The person told staff how much they had enjoyed being transported into the different worlds.
- Staff used creative ways to encourage people to develop friendships and shared interests. People were supported to maintain their hobbies and interests and to facilitate different groups. One person had previously played Bridge with a group of friends. Once they moved to Reigate Grange they continued to invite their friends as well as others living at the service and had formed a Bridge club. Another person had been a choir mistress and was encouraged to form a choir. A number of people had joined and this was proving to be a very popular past time. When looking at plants for the garden, a person with a particular interest in gardening had helped choose the plants and guide staff on how they should be arranged. The person was thanked for their support by being presented with a special award as part of the staff awards

ceremony.

- People told us there were no restrictions on the times they could receive visitors. One person told us, "Family visit and friends if they care to. They can have a meal which is very welcoming." One relative told us, "I can visit anytime and I can stay overnight in the guest suite if I need to." We observed staff greeted visitors warmly by name and made them feel welcome.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- There was a strong ethos and commitment to providing people with person-centred care. One person told us, "Staff are very willing to help, making sure you get what you need." Another person told us, "You only have to ask once and things are done. They remember and talk to each other."
- Staff used information about people's lives when providing their support. The registered manager told us, "We not only listen to people but we act on it. Everything that happens here is led by the residents." For example, one person had previously enjoyed walking every day. Staff now went with the person for long rambles most days, ensuring they changed from their uniforms to create a more relaxed experience for the person. Another person liked to have an occasional take away from a particular fast food restaurant. The registered manager picked this up for them each week.
- Care plans were detailed and gave clear guidance to staff on how people preferred their support to be provided. This included a, 'What's important to me' section. This listed a persons preferred routines, what they liked to talk about and anything that may make the person anxious.
- People's life histories were extremely detailed and included information on the persons family, previous occupations and educational achievements, favourite music, books, poets and places. The level of detailed information provided enabled staff to generate conversation and get to know people. Staff were able to relay this information about people to us and spoke of people with genuine interest in their lives.

End of life care and support

- The registered manager was passionate about providing people with the care they wanted at the end of their life. They told us, "It has to be about them and their family and what they want. We want it to be respectful for them."
- The care people wished to receive at the end of their life was discussed and sensitively recorded. Care plans included details about the person's wishes for their end-of-life care, including their final days, symptom control and wishes after their death.
- The staff had received thanks and compliments from relatives regarding the care they had provided to their loved ones at the end of their life.
- The registered manager understood the impact of a person passing away had on people living at Reigate Grange and ensured people and staff had the opportunity to pay their respects. When someone was leaving the service, staff formed a guard of honour and the persons favourite music was played. The news was shared individually with others and they were able to join staff in saying goodbye should they wish to. A framed photograph of the person was placed discreetly in the communal area with flowers and a candle. These remained in place as a mark of respect until the persons funeral had taken place.
- Relatives were also supported and cared for throughout this process. The registered manager told us, "We have a guest room so families can stay: one family spent a lot of time here. We always offer to have the wake or celebration of their life here because this was their home."

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.

- People's care plans contained detailed information regarding their communication needs. This included details of any sensory impairment which staff needed to be aware of.
- Information displayed within the service was clearly written and where appropriate also had pictorial prompts to aid people's understanding.
- Staff considered the way they presented information to ensure this was suitable for people's individual needs. One person enjoyed doing crosswords but was unable to fully participate in the group due to their sight problems. The group moved to the cinema room where staff were able to project the crossword onto the large screen and enable the person to take an active part.

Improving care quality in response to complaints or concerns

- People told us they were aware how to report any concerns and were confident they would be addressed. One person told us, "I'm sure the management would sort any problems out and I'd go to the management if I had any."
- Information was provided to people and their relatives about how to make a complaint. The providers complaints policy set out clear timeframes for responding to complaints and how they would be dealt with.
- The registered manager maintained a complaints log which showed concerns were responded to promptly and to people's satisfaction. One person who chose to administer their own medicines had expressed concern they did not receive the stock in advance which caused them to worry. This issue was quickly resolved by staff providing the persons medicines a few days in advance to reassure them they would not run out.
- Compliments to the service were also recorded. These included, 'Exceptional staff, high standards' and 'Outstanding care. Makes the future look bright, interesting and fun'.



# 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

- People told us they felt the service was well-led and promoted a positive culture. One person told us, "The place is well run; I would recommend it to anyone." Another person said, "I'm happy here, I enjoy the service and it's well run." One relative said, "The management is stable, a very well-oiled team. Overall, it's like a 5-star hotel, the care and attention to detail is superb."
- The registered manager was clear about the aims of the service and promoted these amongst the staff team. The registered manager told us, "At interview we talk about how we work. During induction I do a presentation about Signatures (provider) values and expectations. The culture here is about warmth, love and kindness and that runs through the staff team." Staff demonstrated an understanding of the positive culture described by the registered manager. One staff member told us, "I like it because it doesn't feel like a care home, it feels like a family."
- The registered manager and senior staff team spent time with people and ensured they understood what was happening within the service. People, relatives and staff told us all managers spent time with people and ensured they dined with people on a regular basis.
- Staff told us they felt supported by the registered manager. One staff member told us, "She is very professional but she's also very approachable. You can go and talk to her about anything, even something small."

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 systems in place to ensure duty of candour responsibilities were followed. Electronic reporting systems prompted staff to consider contact with people and relatives following accidents, incidents and complaints. One relative told us, "They always phone or contact me whenever there is a problem."
- The registered manager told us, "It's about honesty and transparency throughout. We work hard to develop relationships so we can all work together and have open discussions."

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

- Quality assurance systems were imbedded in the service. A series of audits were completed on a monthly basis to monitor quality and ensure best practice guidance was being followed. The provider then completed a quarterly audit to ensure oversight and provide guidance to the registered manager. Action

plans were developed and improvements actioned where required.

- Records were organised and completed in detail. An electronic care monitoring system was used which gave staff instant access to information regarding people's care needs. Staff were able to record the care they had provided to people instantly. They told us the system meant recording was more efficient and gave them more time to spend with people.
- Notifications of significant events were submitted to the CQC in line with requirements.

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

- A series of forums, resident and relatives' meetings were held regularly to ensure people were involved in developing the service. The registered manager demonstrated a commitment to the people being fully involved in the running of the Reigate Grange. They told us, "I steer the ship but the residents are telling me which way to go."
- People were involved in the interview process for senior staff members. Candidates applying for heads of department roles were required to do a presentation to a group of residents. The registered manager told us, "It's essential that residents feel comfortable speaking to them so I need their opinions."
- Staff meetings were held regularly both within departments and as a whole team. Staff told us they felt they could contribute their ideas and were listened to. One staff member said, "They always listen to us and they respond well. They communicate well. It's the only place I work where I can see they do something when I say something."

Continuous learning and improving care

- Surveys were completed to gain views on the service provided from people, relatives and staff. The feedback from the most recent survey was positive in all areas. Despite this, the registered manager had looked at the lowest performing areas and developed an action plan to ensure standards continued to improve.
- The registered manager had introduced a series of care spot checks which involved senior staff completing observations of staff providing care. The registered manager told us, "I wanted to make sure we were all doing things properly and consistently. I'm all for anything that will keep improving things for the residents."
- The provider reviewed systems across their services to ensure consistency and continuous improvement. Registered managers were fully involved in this process. The registered manager told us, "We feel listened to. It's a very democratic process."
- The commitment and care staff provided was recognised and rewarded. People and their relatives were invited to put forward their nominations for the Staff Recognition Awards. These were presented at an evening ceremony at the service.

Working in partnership with others

- Reigate Grange had developed partnerships within the community with churches and local businesses. People were invited to join various social groups and deliver presentations as part of the activity programme. The staff at Reigate Grange had chosen as a team to support two local charities by regularly donating food and toiletries. The registered manager told us, "It came from a staff suggestion. It's about recognising how lucky we are and giving something back."
- A programme had started to recruit volunteers to spend time with people. The registered manager told us, "I want volunteers to bring their life experiences, to start conversations and friendships. My biggest fear for people is loneliness so I want to build a network around them."