

Treeton Grange Limited

Treeton Grange Nursing Home

Inspection report

Treeton Grange
Wood Lane
Sheffield
South Yorkshire
S60 5QS

Tel: 01142692826

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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

Treeton Grange is a care home providing personal and nursing care to 48 people aged 65 and over at the time of the inspection. The service can support up to 50 people.

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

People were safeguarded from the risks of abuse, staff received training in this area and knew how to recognise and report abuse. Risks associated with people's care were identified and risk assessments were in place to minimise the risk. Accidents and incidents were monitored and trends and patterns identified. Lessons were learned when things went wrong. People received their medicines as prescribed. The provider had a robust recruitment procedure which ensured new starters were recruited safely.

People's needs were assessed and care was provided in line with their needs and preferences. Staff told us they received training and support to do their job well. We observed lunch being served and found people received enough food and drink to maintain a healthy and balanced diet. People received support from healthcare professionals when required.

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

We observed staff interacting with people and found they were kind, caring and supportive. People spoke highly of the care and support they received. Staff we spoke with were passionate about preserving people's dignity and respect and enabled people to maintain their independence.

A great emphasis was placed on people being at the centre of their care. Activities were person centred and people's views were taken in to consideration and acted on. Care documents were person centred and incorporated their needs and preferences. The provider worked with other agencies to ensure people were supported at the end of their lives. Staff received training in this area to assist them in supporting people and their relatives during this time. The provider had a complaints procedure in place and responded appropriately to any concerns raised.

The management team supported staff to deliver person centred care to people. The provider engaged people in the service and listened to their comments. A range of audits took place to ensure the service was monitored and the quality maintained.

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 5 September 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?

Good ●

The service was 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.

Treeton Grange Nursing Home

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 one inspector 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

Treeton Grange 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 had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key

information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with seven people who used the service and five relatives about their experience of the care provided. We spoke with nine members of staff including the registered manager, nurse, cook, activity co-ordinator and care workers. We spent time observing staff interaction with people who used the service.

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

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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

- The provider had systems in place to ensure people were protected from the risk of abuse.
- Staff received training in safeguarding and were aware of their responsibilities to keep people safe. Staff we spoke with were confident the registered manager would take appropriate actions to ensure people were safe.
- The registered manager kept a record of safeguarding incidents which showed they had taken appropriate actions in a timely way when safeguarding concerns were raised.

Assessing risk, safety monitoring and management

- Risks associated with people's care and treatment had been identified and action taken to minimise the risk of them occurring.
- Risk assessments were in place for things such as relation to eating and drinking, choking, weight loss, falls and moving and handling.
- The service had processes in place to ensure the building and premises were safely maintained. Equipment such as hoists had been serviced in line with current guidance.

Staffing and recruitment

- People were supported by enough staff to keep them safe and meet their needs effectively.
- Staff we spoke with told us there were always enough people working with them and they worked well as a team.

Using medicines safely

- Systems in place ensured medicines were managed in a safe way. People received their medicines as prescribed.
- Staff responsible for administering medicines had received appropriate training and had a competency check on an annual basis.
- Medicines were stored in a safe way and temperatures were taken of the medication room and fridge.

Preventing and controlling infection

- We completed a tour of the home with the registered manager and found it was clean and well maintained.
- Staff had access to and used personal protective clothing [PPE] such as gloves and aprons. We saw staff washing their hands between tasks.

Learning lessons when things go wrong

- The provider had a system in place to learn lessons when things went wrong.
- There was a system in place for monitoring and recording accidents and incidents. An analysis took place to ensure trends and patterns were identified and actions were taken to minimise future incidents.

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

- People's needs were assessed to ensure the home could provide the right care and could meet their assessed needs.
- In addition to initial assessments at the time of admission to the care home, people's needs were constantly assessed. A review took place every month to ensure people's care was planned and delivered in line with their most recently assessed needs.
- An initial assessment was completed and considered all areas of care including cognition, personal and social care, physical care and psychological needs.

Staff support: induction, training, skills and experience

- Staff told us they felt supported by the management team and had regular supervision sessions and staff meetings. Staff told us they received training and felt this gave them the skills and knowledge to carry out their role.
- Staff completed an induction programme which included mandatory training and shadowing experienced staff to meet people and get used to how the service operated and to get to know people well. One staff member said, "We always learn something from training, we get lots of it, but that's a good thing."

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

- People received a healthy and balanced diet which met their needs and considered their preferences. One person said, "I have the food I want. I pick the things I like and stick to it. I'm not one for lots of different choices." Another person said, "I do really enjoy the food. It is always tasty and I do always pick what I want."
- We observed lunch being served in both dining areas. This was a pleasant experience and staff interacted with people to encourage the intake of a healthy meal.

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

- The provider ensured people had access to healthcare professionals and their advice was followed.
- During our inspection we spoke with a visiting healthcare professional who was complementary about the service. One healthcare professional said, "The home contact us when required. There is always someone available to support our visit and staff know people well and are very helpful. If we advise something, they do follow it through, and things get put in place. Nothing phases the staff here, they are helpful whenever I call even if they are busy and no doubt, they have a million and one jobs to do."

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

- The home was designed to supported people to move around independently. The use of signage was in place to help navigate people around the home.
- The home was decorated to suit the tastes of people using the service.
- People had access to outside space and garden areas which were well maintained.

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.

- Staff were knowledgeable about the principles of the MCA and understood the importance of making decisions in people's best interests.

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

- We observed staff interacting with people and found they were kind and caring. Staff supported people in a respectful and friendly way.
- We spoke with people who used the service and their relatives, and they spoke highly of the care they received. One person said, "The girls [staff] are all very nice and helpful." One relative said, "It's absolutely fantastic. [Relative] has been here for six years and the staff are like family. They are always so upbeat. They're all friendly and professional and I can't say one bad thing about the place."

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

- During our inspection we saw staff asked people about their choices and preferences and these were respected. Staff knelt at the side of people and spoke with them in a calm and caring voice. We heard one staff say, "It's up to you love and what you want to do." This put the control in the hands of the service users and showed that staff respected people.
- Staff we spoke with were keen to support people to make their own decisions.
- Where people lacked capacity there was a 'this is me' document in place to ensure their preferences and choices were captured. This included information about their culture, religious and spiritual background, where they worked, and habits and routines.

Respecting and promoting people's privacy, dignity and independence

- During our inspection we observed staff knocking on bedroom and bathroom doors and waiting for a response before entering the room. One person said, "They do respect my privacy. If I want time to myself, I will shut my door and they respect that."
- Staff we spoke with told us how they promoted independence by offering guidance to enable people to carry out tasks for themselves. One care worker said, "We are big on person centred care here. We close doors and ask people if it's ok to change, wash etc. We let people dress and undress and do tasks for themselves if they can."

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 remained the same. This meant people's needs were met through good organisation and delivery.

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

- People received person centred care and support which met their current needs.
- People and their families and relevant others were involved in developing support plans. Support plans also incorporated people's preferences and choices.
- We spoke with people who used the service and their relatives, and they were complimentary about the care and support provided at the home. One relative said, "Honestly, [name] couldn't be in a better place. They [staff] keep him busy and active and they listen to him. I never worry when I leave here because it's five-star service [name] gets."

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

- The provider employed an activity co-ordinator who was responsible for organising activities and social events.
- On the day of our inspection we observed activities taking place and people getting involved and enjoying them. One person said, "[Activity co-ordinators name] organises a lot of things to do. I like joining in with things. We've just been talking about the news." One relative said, "The activities are great. [Relative's name] joins in with as much as they can. The gardens are lovely, and [relatives name] does go out a lot in the warmer months and they [staff and residents] do a lot out there."
- People had access to the wider community. For example, people regularly attended a luncheon club in the nearby village. This helped people make new friends and reunite with old school friends.

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.

- Information was presented to people in a way they could understand. For example, pictures and photographs were used as a way of communication.
- Some people who used the service used their own sign language which they had developed. Staff had effectively learned this and communicated with people in a person-centred way.

Improving care quality in response to complaints or concerns

- The provider had a system in place to ensure people could raise concerns about the service.
- The registered manager completed a record of concerns they had received. We saw these had been

appropriately dealt with in line with the providers policy.

- Relatives we spoke with told us they would be able to talk to staff if they had any concerns and felt they would be listened to.

End of life care and support

- The provider had systems in place to ensure people received compassionate end of life care.
- Care plans included details around end of life care and included cultural and spiritual needs and preferences.
- The service worked alongside the local hospice in supporting people at end stages of their lives. There was a file in place which gave detail of contact numbers to call for support with end of life care.

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

- The registered manager, management team and members of staff we spoke with, were dedicated to providing person centred support for people.
- There was a strong recognition that people were at the centre of their care and support, led fulfilling lives and interacted as part of the community.
- The registered manager was in the process of completing a 'leading change developing care' training course to develop staff by leading and coaching them.

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 registered manager understood their responsibilities and acted in line with their legal requirements.

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

- The registered manager had systems in place to ensure people who used the service, their relatives and staff, could feedback their view about the home.
- Residents and relatives meetings took place to give people the opportunity to have a voice in developing and improving the service.
- Professionals and relatives were asked to complete an annual quality survey. We saw the results from the last survey completed and found positive comments had been made about the service.

Continuous learning and improving care

- The provider had a system in place to measure and improve the service.
- The management team carried out audits such as medication, infection control and health and safety, to ensure any issues were identified. Action plans were then drawn up to address any concerns.

Working in partnership with others

- The provider worked in partnership with other professionals, learned from them and took their advice on board.
- When people required the support of other professionals and specialist support this was sought in a timely way.

- Staff we spoke with told us how they worked with other professionals to ensure people received appropriate support in line with what the professionals had advised.