

# Cygnet (OE) Limited Thornfield Grange

### **Inspection report**

Website: www.cygnethealth.co.uk

60 Etherley Lane Bishop Auckland County Durham DL14 7QZ

DL14 7QZ Tel: 01388602920 Date of inspection visit: 22 February 2023

Good

Date of publication: 13 March 2023

### Ratings

## Overall rating for this service

Is the service effective?	Good •
Is the service caring?	Good •
Is the service well-led?	Good •

# Summary of findings

### Overall summary

### About the service

Thornfield Grange is a care home and provides accommodation and support for up to 9 people living with a learning disability and/or autistic spectrum disorder. There were 9 people living at the service when we visited.

### 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.

### Right Support

People were actively encouraged to access the community and develop life skills and independence. 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 on the whole supported this practice.

### Right Care

Staff promoted equality and diversity in their support for people and each other. The service worked proactively with other agencies to ensure people's wellbeing, and additions to the staff team of psychology and other therapy support meant best practice guidance was consistently followed. Where people had support, this was flexible, available when they needed it and to the level they needed. Staff understood and responded to people's individual needs. Staff understood and supported people's individual communication ways.

### Right culture

The culture at the service had significantly improved, with a highly motivated, knowledgeable and empathetic staff team. Staff placed people's aspirations, needs and rights at the heart of everything they did. They sought advice and feedback from everyone involved in people's care. The environment was bright and highly personalised. Staff were aware of and working to best practice guidance for supporting people with a learning disability and/or autistic people.

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

### Rating at last inspection and update

The last rating for this service was requires improvement (published 11 July 2019). At the time we found the service needed to make improvements regarding the environment and culture.

### Why we inspected

We carried out an unannounced inspection in May 2019 and found improvements were needed. We undertook this focused inspection to check the service had followed their action plan and to confirm improvements were made. This report only covers our findings in relation to the Key Questions effective, caring and well-led which contain those improvements.

We assessed whether the service is applying the principles of Right support right care right culture. We looked at infection prevention and control measures. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

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 has changed from requires improvement to good. This is based on the findings at this inspection.

### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Thornfield Grange on our website at www.cqc.org.uk.

### The five questions we ask about services and what we found

We always ask the following five questions of services.

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 well-led?	Good ●
The service was well-led.	
Details are in our well-led findings below	



# Thornfield 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.

Inspection team

The inspection was carried out by 1 inspector.

### Service and service type

Thornfield 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. Thornfield Grange is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post. They were on annual leave at the time of our visit and we carried out the inspection with the deputy manager.

### Notice of inspection

This inspection was unannounced. Inspection activity started on 22 February 2022 and ended on 28 February 2023. We visited the service on 22 February 2023.

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, care professionals and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

### During the inspection

We spoke with 5 people who use the service, and 3 relatives. We spoke with 7 staff including the deputy manager, nurse and 6 support staff

We reviewed a range of records. This included 4 people's care records and medicine records. We looked at 4 staff files in relation to recruitment. We also viewed a variety of records relating to the management of the service, including audits, policies and procedures.

# 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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- At the last inspection staffing was not always provided by well trained and consistent staff.
- At this visit we found teamwork had significantly improved and staff were well trained and knowledgeable about the people they were supporting.
- New staff completed a full induction programme to ensure they had enough knowledge and skills before providing people with support. Their induction was reviewed regularly, and training was very specific to the service.
- Staff received support in the form of continual supervision, debriefs, appraisal and recognition of good practice. Staff told us, "I am very well supported," and "We have made massive changes in the right direction, we are really moving with the times now."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law At our last inspection, the signage, decoration and other adaptations to the premises did not always meet people's needs or promote a homely environment or support people's preferences and confidentiality.

- We found significant improvements at this visit. The house was full of photographs, appropriate signage and furnishings and decor were homely and welcoming.
- Anyone moving to the service had this well planned and any assessment was detailed and person led.
- People were involved in deciding how their care and support was provided where possible. People's relatives and health and social care professionals were also involved.
- Staff had an electronic system where support plans and records were stored. This meant the management team and staff had access to up to date information on the day to day support people required.

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 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 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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- People's consent to care and treatment was obtained and recorded in their care records.
- The registered manager and staff team knew about people's individual capacity to make decisions and understood their responsibilities for supporting people to make their own decisions.

• We observed staff members supporting people using communication tools to make decisions for themselves.

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

- People were supported to maintain a balanced diet.
- We saw the service actively sought professional support where needed to ensure people's nutritional needs were met.
- People were encouraged to have choice and in learning skills around preparing food and drinks for themselves to promote their independence.
- One relative told us, "[Name] can pour his own juice now. It's a little thing, but for him, that's massive."

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

- Staff understood when to escalate concerns with people's health to a healthcare professional. For example, if a person became unwell.
- The service recorded relevant information about people's care in their daily notes. There were also good handover systems to ensure consistency of care and support and observations of people.
- We observed staff members speaking positively of the impact of working with all the professionals involved in the person's support. They told us they were now better able to manage any distressing situations with people and felt they were supported with thorough support from senior managers.

# 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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to 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 At our last inspection we found that institutional language in records and behaviour meant people may not have been treated with dignity and respect.

- Staff were observed to be regularly interacting with people who enjoyed their company. We observed sensitive interactions between people and staff who showed complete empathy and understanding when this was required along with sharing humour and fun.
- Good systems and processes to record daily activities of care and support were used by staff. This meant any person-centred support omissions or refusals of activities or tasks were reviewed at management level which improved people's care and experiences.
- Support plans included detail of any diverse needs for people to ensure these were known to staff and respected. This included detailed communication and sensory assessments which staff were able to talk with us about in terms of the person they were supporting.

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People and their relatives were actively involved in the planning of their care and support and were supported to express their views. A relative said, "They are now getting out and accessing the community and really enjoying life. They don't come home now as they regard Thornfield Grange as their home."
- Staff understood the importance of maintaining dignity, privacy and providing compassionate care and support. One relative we spoke with told us they had been delighted to receive some flowers sent from the service on behalf of their relation.
- We observed staff encourage and support people to be as independent as possible, for example at mealtimes which were calm with staff role modelling a positive, social event as they ate with the person they were supporting.

# 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 as good. At this inspection the rating 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.

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

- The registered manager maintained clear oversight of the service. They critically reviewed the service to determine how further improvements could be made.
- The provider had a robust system of audits and checks to monitor the quality and safety of the service.
- We received feedback from a commissioner of the service. They said, "I find the manager very approachable and knowledgeable in her field. She is to my mind, an open practitioner and always honest when mistakes have been made or safeguarding incidents have been highlighted.."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The culture at the service had significantly improved since our last inspection. Teamwork had improved and staff were highly motivated and told us they felt valued.
- We saw that people were involved in meetings and regularly asked to give their feedback about the service.
- Relatives told us staff were "Very communicative" and "Honest".
- The service worked with multi-disciplinary partners to enable people to have communication methods and tools so they could speak up and make choices.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Continuous learning and improving care

- The provider understood their duty of candour responsibilities.
- People and staff described the management team as always accessible and open to listening and receiving feedback.
- The service worked in an open and transparent way to share learning with the whole staff team regarding incidents and areas for improvement. Staff we spoke with said they were encouraged to self-reflect about their communication and behaviour to ensure they were displaying positive values.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

• The provider sought the views of people. People were involved in regular meetings and ways of supporting their communication were actively sought by staff and professionals working with the service.

- Relatives spoke positively about the communication with the service. One relative said, "They send me emails and ring me, I know he is in the right place and I don't worry anymore."
- The service worked proactively with other health and social care professionals who were involved in people's care. Staff ensured people were supported in a way that reduced any distress and ensured people's mental and physical well-being was promoted.