

Future Directions CIC

Grange Ave

Inspection report

41 Grange Avenue
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Manchester
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Tel: 01617699490

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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

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.

About the service

Grange Ave is a care home providing personal and nursing care to five people with mental health needs, a learning disability and autistic people at the time of the inspection. The service can support up to five people.

Each person living at Grange Ave has their own independent flat, with bedroom, kitchen, lounge and bathroom. There are no communal areas within the home.

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

People had individualised support and were involved in reviewing and agreeing their support needs. Person-centred risk management and care plans provided guidance and information about people's support needs, including strategies if people became agitated. People received their medicines as prescribed and these were regularly reviewed.

Staff had the training and support they needed to provide high quality and safe support. They said they felt well supported by the management team. Staff supported and prompted people to be independent where possible. Staff were safely recruited. Staff knew how to report any concerns they had.

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. People had advocates to support them in making decisions about their care and support.

A quality assurance system was in place, with audits and checks being made by the service manager, nurses and at a provider level. The management team were very knowledgeable around the transforming care agenda and closed cultures. The service worked with a range of professionals, who were positive about the support provided and the achievements people had made in their lives.

Current government guidelines for the use of personal protective equipment (PPE), COVID-19 testing for staff and visitors, and vaccination as a condition of employment were being followed.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. Staff knew people and their needs well, provided flexible person-centred support and supported people to engage in the activities they wanted to do, including going out into the

community.

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 1 July 2019).

Why we inspected

We undertook this inspection as part of a random selection of services rated Good and Outstanding to test the reliability of our new monitoring approach.

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.

Grange Ave

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.

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

One inspector and a member of the CQC medicines team carried out the inspection. An Expert by Experience telephoned relatives to gain their feedback about Grange Ave. 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

Grange Ave 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 inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. 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 three people who used the service about their experience of the care provided. We spoke with six members of staff including the registered manager, service manager, nurse and members of staff.

We reviewed a range of records. This included two people's care records and four medication records. A variety of records relating to the management of the service, including quality assurance and policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at two staff files in relation to recruitment. We spoke with five professionals who regularly visit the service. An Expert by Experience telephoned three relatives to gain their feedback about Grange Ave.

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.

Assessing risk, safety monitoring and management

- Risks people may face were identified and guidelines were in place to manage these risks. Due to people's complex needs a multi-disciplinary team approach was used, involving the person and professionals, to agree how the risks were to be managed.
- Positive Behaviour Support (PBS) plans were used to identify possible triggers for people's anxieties and agree guidelines for staff to minimise these and support people if they became agitated. Staff were able to describe the strategies they used for each person and had completed training in PBS. We saw staff had successfully supported one person to reduce their self-harming behaviours.
- The provider employed their own PBS specialist lead who was available to advise and support Grange Ave with PBS plans and monitoring when needed.
- Equipment within the home was regularly checked by members of staff and was serviced in line with national guidance.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Policies and procedures were in place for the reporting and investigating of any concerns. Staff knew what should be reported and how to do this. They said any concerns raised had been acted upon by the registered and service managers.
- All incidents were recorded electronically and reviewed by the service manager. The system prompted the incident to be investigated and actions identified to reduce the risk of a re-occurrence.

Using medicines safely

- Staff administering medicines had been assessed as competent to do so. Staff knew people well and met their medicines support needs.
- Records used for the administration of medicines were clear and complete. Records for the administration of "when required" medicines were person centred.
- Staff worked well with prescribers to review the use of anti-psychotic medicines.

Staffing and recruitment

- Staff were safely recruited with all pre-employment checks completed before new staff started working at the service.
- People had individually commissioned staff support, which was reflected on the rota. There was a regular staff team and low staff turnover.

Preventing and controlling infection

- The communal corridors were visibly clean. Each person was prompted and supported to clean their own flat. Cleaning schedules were used to ensure all cleaning tasks were completed.
- Staff followed the current government guidance for using PPE. People were prompted to use PPE when they went out. All staff had been fully vaccinated for COVID-19 and took part in regular testing for COVID-19.
- All visitors needed to have a lateral flow test prior to entering the building. Systems were in place to check visiting professionals had been fully vaccinated.

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

- A comprehensive assessment was completed prior to people moving to the service. People had moved to Grange Ave from long stay hospitals. The registered manager and staff team worked with the person and the hospital team to get to know the person and their support needs prior to moving to Grange Ave.
- Assessments were detailed, person-centred and included people's goals and longer-term aspirations. Information about people's lives was recorded so the staff were knowledgeable about people's past and how that could impact on their support needs today.

Staff support: induction, training, skills and experience

- Staff said they felt very well supported by the service manager, nurses and registered manager. Regular supervision and team meetings were held, with staff being able to raise any ideas or issues that they had. One member of staff told us, "I can speak with the (service) manager. We also have monthly staff meetings, and everyone can bring any concerns they have about the service users."
- Staff received the training they needed to carry out their roles. New staff completed a comprehensive induction course, including shadowing experienced staff to get to know people and their support needs. New training had been sourced for additional topics including mental health, alcohol misuse, self-harm and relationships. A member of staff said, "We have the best training platform, with workshops and on line training. I've had positive behaviour support training; it was a big help in understanding the reasons for any behaviours and how to keep the people we support and staff safe."
- Staff were supported to enrol as trainee nursing assistants and on further education courses in health and social care. This assisted staff career progression and staff retention.

Supporting people to live healthier lives, access healthcare services and support

- People were effectively supported to maintain their physical and mental health and wellbeing. A specialist support team had continued involvement following a person's discharge from hospital and was involved in monitoring and reviewing people's care and mental health needs. They also provided additional, bespoke training and support for staff when required.
- The service had a good relationship with other medical professionals. The GP made weekly phone calls to the home and was pro-active in arranging medicine and health reviews. The home also worked well with the learning disability team and nursing home team. A professional said, "The staff team are very responsive to [Name's] needs and all of their health needs are closely monitored and met."
- Each person had a health action plan in place detailing the support they required to maintain their health. People also had a hospital passport, which provided information for hospital staff about each person's support and communication needs. The registered manager told us Grange Ave staff would stay with people

if they were in hospital to provide emotional support and to liaise with hospital staff.

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

- People were supported to plan and prepare their meals, taking into account any dietary needs. For example, one person was being supported to have a healthier diet due to the risk of developing diabetes.
- Each person had their own kitchen facilities in their flat. People were supported to buy and prepare their own food where possible to increase their independence.
- People's likes and dislikes were clearly identified within their care plans.

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.

- Grange Ave was working within the principles of the MCA. Capacity assessments were completed for each decision and best interest decisions made where people had been assessed as not having capacity to make the decision.
- A restrictive practice plan identified the agreed restrictions and the support people needed. For example, when people went out or support for people to smoke safely.
- Staff knew people well and how to respond flexibly depending on people's mood or anxiety. For example, people needed additional support on some days if they were not in a good mood.

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

- Each person was able to personalise their own flats as they wanted to.
- A programme of re-decoration was in place for each flat and corridors. The internal fire doors were also due to be replaced. This had been delayed due to COVID-19 but was due to recommence in early 2022.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People were comfortable chatting and engaging with members of staff. Staff knew people well, what they enjoyed and how to reduce people's anxieties.
- Staff understood people's history and backgrounds and supported them to discuss what they wanted to achieve and make changes to work towards these goals. For example, one person had been supported to reduce self-harming behaviours and another to stop drinking alcohol.

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

- People were involved in agreeing their care and support. Where needed, people were supported by an independent advocate. The advocate told us, "The staff get to know people and their needs well and they try to always have familiar staff supporting people. They involve people in planning and reviewing their own care and support."
- One person had said they would like to move to a different placement. They were being supported to explore this with their social worker.
- Regular discussions with each individual were held to gather feedback about the service and what people wanted to do. These covered regular topics, such as COVID-19, activities people wanted to do and how people were feeling, as well as prompting people to talk about their wishes and anything they were not happy with. The feedback from the most recent discussions was positive, with one person commenting, "Staff help me to be more independent in my flat, like with cooking," and another said, "The staff are helpful. They respect my wishes and encourage me to plan activities I want to do."

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity were respected. Staff entered people's flats after gaining people's consent to do so. Staff knew people and their needs well. They explained how they maintained people's privacy and dignity when supporting them.
- People had increased their independence whilst living at Grange Ave. Where possible people shopped and cooked for themselves. Others had support to be involved as much as they wanted to be.
- The service and registered managers described how they had undertaken road safety skills with one person and were working with other professionals to assess the risk and support they would need to be able to go out on their own.

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 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; End of life care and support

- People were supported on an individual basis and staff were able to be flexible to meet people's changing needs. Where assessed, people were able to go out or spend time in their flats on their own. A professional working with the service said, "The staff at Grange Avenue have worked extremely hard with [Name] and the progress made to date is exceptional. They have also formed a relationship of trust over time which has also contributed to [Name's] progress."
- Detailed person-centred care and support plans were in place which provided information about each person's preferences, choices and the support they needed. A one-page profile was used to provide a brief overview of each person and their support needs.
- The care plans were regularly reviewed and updated. However, the most recent plan was not always printed for each person's file, which meant staff may read old information from the paper files. This was rectified by the service manager during our inspection.
- People had not wanted to talk about their end of life wishes. We discussed this with the registered and service managers, who said that end of life wishes were part of people's reviews and people would be supported to remain at Grange Ave if they wished to at the end of their lives.

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.

- Communication passports had been written where required to give guidance on how best to communicate with the person and explaining what the person is communicating to the staff with their body language and actions.
- Information was available in an easy read format.

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 were supported to plan the activities they wanted to do each week, although these had been affected by the COVID-19 pandemic. A vehicle was available for people to use to go further afield.
- On-line activities had been developed with other homes during the pandemic for example, bingo and exercises, which some people had taken part in.
- People were supported to keep in touch with their families where they wanted to do so. iPads had been

made available during COVID-19 so people had been able to phone or video call family and friends.

Improving care quality in response to complaints or concerns

- A formal complaints policy was in place. No recent complaints had been received.
- A complaints box had been introduced for people or staff to use if they wanted to. Each staff meeting had an agenda item to discuss any complaints that had been received.

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 outstanding. At this inspection this key question has been rated as 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- We saw people were settled living at Grange Ave and had made positive changes to their lives. People were involved in reviewing and agreeing their care, support and goals. One person said, "Since I stopped drinking I've saved money and been able to buy a lot of stuff like trainers and art things. Staff encouraged me to do this and it keeps me out of trouble."
- People and a wide range of professionals were involved in reviewing and agreeing people's support needs. One professional told us, "The service involves people in planning and reviewing their care and support, they are at the centre of the home's care."
- Members of staff said they were able to contribute any ideas or concerns to team meetings and individual supervisions. They felt able to speak with the service manager at any time if they needed to.
- We were told some people made their own choices about what information was passed to their family and how involved the family were in people's lives. The provider respected this. This did mean that some family members felt that the home did not always give them enough information or involve them in their relative's life as much as they wanted.
- The provider was part of a national pilot programme for evaluating training to improve access to health and hospital services for people with a learning disability and autistic people. The provider was also developing a values-based training programme for managers and had started human rights training for members of staff.

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

- There was a clear management structure at Grange Ave. The registered manager had an additional role of overseeing three other registered services. They regularly visited Grange Ave. The service manager worked full time at Grange Ave and oversaw the day to day running of the service. They were completing a level five diploma in management, with a view to becoming the registered manager for Grange Ave in the future.
- The registered and service managers had a good understanding of the Transforming Care agenda to enable people to live within their local community rather than in a long stay hospital setting.
- The service was implementing the values of Right support, right care, right culture to support. This expects services to ensure autistic people and people with a learning disability have the choices, dignity, independence and good access to local communities that most people take for granted.
- The registered and service managers were aware of the possibility of a closed culture developing at

Grange Ave as each person lived separately in their own flats. A closed culture may develop where there is limited links with external professionals and local communities. Regular checks to each flat were made by the service manager and nurse on shift to ensure people were receiving the support they needed. People went out, some with support and others on their own. A range of professionals were regularly involved in people's care and support. The provider's quality team were developing an audit to assess if a closed culture was developing at any of their services.

Continuous learning and improving care; Working in partnership with others

- A quality assurance system was in place. The service manager and nurses made regular checks for a range of areas, including care plans, medicines and staff training. The registered manager carried out formal audits on a planned basis. An action plan was written for any issues found. These had been implemented and signed to show they had been completed.
- Monthly clinical report summaries were written for each person. These detailed any changes, for example in medicines or behaviour and any health appointments attended. These were shared with the relevant social workers and learning disability teams.
- A monthly governance meeting for all the providers services checked a range of key indicators, such as care plans being up to date, team meetings had been held and any learning from incidents that had occurred.
- A range of professionals, including specialist support teams from the long stay hospitals when people first moved to Grange Ave, learning disability teams and social workers were involved in reviewing and agreeing people's care and support needs.
- The home had a good relationship with their GP, who had weekly contact and was pro-active in ensuring people's medical needs were met.
- All incidents and accidents were reviewed, and actions taken to reduce the risk of a re-occurrence. Staff had a debrief following an incident. The providers specialist positive behaviour support lead was available to support and advise Grange Ave with strategies for supporting people's anxieties. We noted there had not been many recent incidents at Grange Ave.
- The provider was developing additional training resources for managers in leading a team and for nurses to provide more mentoring and guidance for members of staff when facing stressful situations.

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 and service managers were aware of their legal responsibilities and notified the CQC and local authorities appropriately when required.