

# Horizon Care (Waterside Grange) Limited

## Waterside Grange

### Inspection report

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### Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

### About the service

Waterside Grange is a residential care home providing personal and nursing care for up to 83 people. Some people using the service were living with dementia. At the time of our inspection there were 49 people living at the home.

### 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.

Staff were knowledgeable about risks associated with people's care.

Accidents and incidents were monitored, and trends and patterns identified. Lessons were learned when things went wrong.

People received their medicines as prescribed. Competency checks were carried out and staff were knowledgeable about medicine management.

The provider had a robust recruitment procedure which ensured new starters were recruited safely.

We observed staff interacting with people and socially engaging with them. Staff we spoke with felt there were enough staff. They also told us that the management team was supportive and assisted them when needed.

The provider made sure infection control processes helped keep people safe during the COVID-19 pandemic. The home was clean and there were PPE stations situated at several points throughout the home.

The provider had managed the current pandemic well and implemented effective procedures.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

This service was registered with us on 19/06/2019 and this is the first inspection.

The last rating for the service under the previous provider was good (published on 26 March 2019).

### Why we inspected

The service had not received an inspection since registration, and we needed to ensure the service was safe. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

Additionally, the inspection looked at the Infection Prevention and Control (IPC) practices the provider has in place. This is because, as part of CQC's response to care homes with outbreaks of coronavirus, we are conducting reviews to ensure the IPC practice was safe, and the service was compliant with IPC measures.

We reviewed the information we held about the service. We did not inspect other key questions as no areas of concern were identified in them.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Waterside Grange on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

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 19 June 2019 and this was the first inspection. The last rating for the service under the previous provider was good (published 26 March 2019).

#### Why we inspected

This was a planned inspection in line with our inspection programme. We have made changes to the way we work due to the COVID-19 pandemic. This is to avoid putting pressure on services that are caring for people. We completed a focussed inspection. During this inspection we looked at the key questions of 'is the service safe?' and 'is the service well-led?'.

We do not look at all of the five key questions during a focussed inspection. Therefore, the service was not given an overall rating.

We looked at infection prevention and control measures under the key question of 'is the service safe?'. 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 coronavirus and other infection outbreaks effectively.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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 well-led?

Good ●

The service was well led.

Details are in our safe findings below.

# Waterside 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.

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

The inspection was carried out by one inspector.

#### Service and service type

Waterside 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 did not have a manager registered with CQC. A registered manager and registered provider are both legally responsible for how the service is run and for the quality and safety of the care provided. There was an interim manager in post whilst the recruitment of a registered manager is completed.

#### Notice of inspection

We gave the service notice of the inspection. This was because we have changed the way we inspect due to Covid-19 and needed to check with the manager what information we could review electronically and what we would need to look at on site. Inspection activity started on 7 December 2020 and ended on 11 December 2020. We visited the care home on 10 December 2020.

#### What we did before the inspection

Prior to the inspection we reviewed information and evidence we already held about the home, which had been collected via our ongoing monitoring of care services. This included notifications sent to us by the home. Notifications are changes, events or incidents that the provider is legally obliged to send to us without delay. We also sought feedback from the local authority. The provider was not asked to complete a

provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

#### During the inspection

We spoke with three people who used the service and four relatives about their experience of the care provided. We spoke with five members of staff including a director, the manager, clinical lead and three care and housekeeping staff.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We reviewed a range of records. This included four people's care records and multiple medication records. We also looked at a variety of records relating to the management of the service, including policies and procedures.

#### 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.

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.

### Using medicines safely

- People received their medicines on time and as prescribed.
- Staff had received training in the administration of medicines and medicines were stored safely.
- Where people were prescribed 'as required' medicines, protocols were in place and staff were aware of when people needed their medicines.
- Where issues were identified such as, no 'opened on' date for some liquids, we found no evidence people had been harmed and the provider was quick to rectify them and organise individual staff supervision where appropriate.

### Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they had no concerns about safety. One relative said, "[person] is absolutely safe at Waterside Grange, it's a great place."
- People were protected from abuse by staff who had received training to recognise and report any concerns.
- Staff were able to tell us about the training they had received regarding safeguarding, and what they would do if they suspected anything was wrong. One staff member told us, "I would report any concerns immediately, I have received training and refreshers about protecting people from abuse. There are posters around the home, displaying information."

### Assessing risk, safety monitoring and management

- Risks associated with people's care were identified and risk assessments were in place to minimise those identified.
- Staff knew people well and were knowledgeable about the risks involved in their care.
- Staff had access to risk assessments via an electronic system.
- Relatives we spoke with felt their family member was safe living at the home. One relative said, "I have total confidence in the safety of the building and the people keeping it safe."

### Staffing and recruitment

- People and their relatives felt there were enough staff to keep them safe. One person told us, "There are always staff around."
- There were sufficient staff to meet people's care needs. We observed that staff were not rushed and responded promptly and compassionately to people's requests for support.
- The provider had systems in place to help ensure that staff were recruited safely.

### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

### Learning lessons when things go wrong

- There were processes in place to enable the manager to monitor accidents, adverse incidents or near misses. This helped ensure that any themes or trends could be identified and investigated further. It also meant that any potential learning from such incidents could be identified and cascaded to the staff team, resulting in continual improvements in safety.



# 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.

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

- All services registered must notify the Commission about certain changes, events and incidents affecting their service or the people who use it. Notifications tell us about significant events that happen in the service. We use this information to monitor the service and to check how events have been managed. We found statutory notifications had been submitted as required.
- There was a clear staff structure and staff told us they made up a strong team and worked well together. Comments from staff included, "I think we have a great team who work very hard for each other", and "I think the pandemic has brought us even closer together. We have a fantastic team."
- The provider had quality assurance checks and audits in place and these were used effectively to identify shortfalls, errors and omissions. The provider is considering increasing the frequency of medication audits.

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

- The management team and provider promoted a positive culture within the home.
- Staff felt the culture was person-centred, open, and inclusive. One staff member said, "The manager is open, honest and always accessible and supportive."
- Relatives we spoke with told us they found the management team very approachable. One relative told us, "The staff and management are great, I really can't fault them."

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

- Records showed staff engaged with a range of health and social care professionals.
- Staff meetings were held regularly. Records showed there was an opportunity for quality issues to be discussed and for staff to share ideas.
- Due to the COVID -19 pandemic opportunities for people to access any community activities were restricted. We saw photographs of several activities taking place such as, Halloween mask making and baking.
- People and relatives said they had been kept informed about changes due to the pandemic. One relative said, "I believe the staff have handled the lockdown well. They have kept any change of routine to a minimum and kept us fully informed."
- Staff surveys, team meetings and supervisions were used to capture feedback from staff. One staff member told us, "Our opinions and views are always asked for and valued."

- Members of the management team spent time with all staff and would vary their hours to ensure night staff felt as valued and included as the day staff.

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 manager had a clear understanding of their responsibilities and acted on the duty of candour. People told us they were kept informed of any changes in the home and around their care and support.
- The rating from the last inspection was on display in the home.
- The provider had informed the CQC when relevant events had happened at the service, as it is legally required.

Continuous learning and improving care

- The manager and staff team had systems in place to learn from accidents, incidents and safeguarding concerns. This included any lessons learned from any of the provider's other homes.

Working in partnership with others

- Collaborative working with agencies and organisations was prioritised. The manager spoke highly of professional relationships the service had established with a range of professionals such as GP's and district nurses.