

Langdale House Limited

Everdale Grange

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Everdale Grange is a care home providing personal and nursing care to up to 67 older people. At the time of the inspection, 66 people were using the service.

Everdale Grange accommodates people across three separate areas within the building, one of the areas specialises in providing short term respite care. The other areas specialise in caring for people living with dementia, physical disabilities, nursing care and palliative care.

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

People told us they received safe care. Staff we spoke with understood safeguarding procedures and were trained in this area.

Risk assessments were in place to manage risks within people's lives, and staff understood how to follow them and provide safe care to people.

Staff recruitment procedures ensured that appropriate pre-employment checks were carried out. Medicines were stored and administered safely. Some improvements were required to ensure the recording of all topical medicines was clear and complete.

Staffing support matched the level of assessed needs within the service during our inspection, and people and relatives we spoke with said that staffing levels were sufficient.

The home was clean, tidy and well maintained, and people confirmed that staff followed infection control and food hygiene procedures effectively.

The management staff we spoke with were open and honest, and worked in partnership with outside agencies to improve people's support when required. Audits of the service were detailed, and any issues found were addressed promptly. The service had a registered manager in place, and staff felt well supported by them.

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 12 April 2019).

Why we inspected

We received several concerns in relation to the safe care and treatment of people, infection control standards, staffing levels, management of falls, and medication. As a result, we undertook a focused

inspection to review the Key Questions of Safe and Well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other Key Questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those Key Questions were used in calculating the overall rating at this inspection.

The overall rating for the service has not changed. This is based on the findings at this inspection.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe and well led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Everdale Grange on our website at 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 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 well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Everdale 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

This inspection was carried out by two inspectors.

Service and service type

Everdale 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

Before the inspection we reviewed information that we held about the service such as notifications. These are events that happen in the service that the provider is required to tell us about. We also considered the last inspection report and information that had been sent to us by other agencies. We also contacted commissioners who had a contract with the service.

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.

We used all of this information to plan our inspection.

During the inspection

We spoke with seven people using the service, and one relative of a person using the service. We also spoke with three care staff, four health and social care professionals who were working within, but not employed by the service, the chef, the acting manager, the registered manager, the operations manager, and the provider. We reviewed the care plans and other associated records for four people using the service. We looked at other records in relation to the management of the service, these included staff recruitment files and quality assurance systems and processes.

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.

Using medicines safely

- Some improvement was required to ensure the administration of all topical medicines and skin barrier creams were recorded accurately. The information was not always recorded in one place, making it difficult to identify what had been administered and when. We spoke with the manager who made immediate changes to the recording procedures, to ensure medication administration records (MAR) for topical medicines were used accurately.
- All other MAR we looked at were completed fully and accurately. Medicines were stored safely and administered by staff who were trained to do so. People we spoke with were happy their medicines were administered correctly.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. One person said, "Let me tell you something. I feel safer here than I do at home. It's very good. I've got a buzzer, they come quickly. Including in the night."
- Staff knew how to identify signs of abuse and were aware of the action they should take if they had any concerns for people's safety. Staff told us they had received training about keeping people safe. One staff member told us, "I think they (management) are lovely. I have confidence they would sort anything out if I raised anything."

Assessing risk, safety monitoring and management

- Risk assessments were completed to identify risks to people's health and safety such as their risk of falls, and evacuation plans in case of emergency. Staff reviewed the risk assessments regularly and as required and put actions in place to reduce these risks.
- Risks were assessed and monitored to keep people safe. Regular checks took place on any equipment in use for people's safety, such as hoists and slings.
- During our inspection we observed staff use a hoist and sling to transfer a person to a seat. We saw this support was given safely, by trained staff, who took their time and reassured the person.

Staffing and recruitment

- People told us that staffing levels were generally good. A relative of a person said, "The staff that have been here for a while are really good. They are busy, but they have time to spend time with people."
- A dependency tool was used to assess the amount of staff required to provide safe care to people. During our inspection, we observed that people got the support they required promptly from staff, and that staff were distributed across the service appropriately.

- Safe recruitment and selection processes were followed. The necessary pre-employment checks were carried out which ensured only fit and proper applicants were offered roles. This included Disclosure and Barring Service (DBS) checks. The Disclosure and Barring Service carry out a criminal record and barring check on individuals who intend to work with children and vulnerable adults, to help employers make safer recruitment decisions.

Preventing and controlling infection

- The service was clean and tidy throughout. We saw cleaning staff were on shift and were distributed throughout the service.
- People we spoke with confirmed the service was maintained and cleaned to a good level. One person told us, "Yes good, gloves and aprons. Always clean and hygienic, no concerns about that." Another person said, "It's marvellously clean, they are always sweeping and cleaning."
- Staff we spoke with told us they had plenty of personal protective equipment (PPE) to ensure correct infection control procedures were carried out. This included gloves and aprons used for personal care tasks.
- Food hygiene practices were followed by staff. The kitchen areas were clean and had been awarded a five star for food hygiene practices by the local authority.

Learning lessons when things go wrong

- Accidents and incidents were recorded in detail, with actions followed up to ensure that lessons were learnt. Staff and management we spoke with all promoted a culture of continuous learning to improve the quality of service.
- One staff member told us, "They (management staff) tell us things we need to improve, and things we are doing well."

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

- People, relatives and professionals we spoke with all felt the service was open, honest, and well run. A health and social care professional told us, "The reablement is good here. The morale is generally good. The communication between staff is very good, it's the smoothest it's been for a long time." Another professional said, "The staff here follow our advice and recommendations, they are very good and know people's needs well. There is an effective management team." A staff member told us, "The managers deal with things promptly and offer support. They listen, they are perfect."
- Managers and staff were enthusiastic and committed to providing a good quality service for people.
- Management staff told us about the differences in care and culture within the different areas of the home. They were promoting a different approach to care within the reablement service, to maximise people's recovery and ensure they gained independence as quickly and as safely as was possible, in order to return to their own homes.

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 management maintained records of accidents and incidents and responded to complaints appropriately. Information and learning were shared with staff to reduce the likelihood of recurrence.
- The management team understood information sharing requirements. We saw that information was correctly shared with other agencies, for example, when the service had identified concerns, and sent us notifications about events which they were required to do by law.

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

- Staff were clear about their responsibilities and the leadership structure in place. People said they knew who the registered manager was, and staff told us they felt well supported by the registered manager. One staff member said, "Managers are approachable, I can raise anything with my senior carer in the first instance and I know where to go from there if needed."
- The management team were well organised and had a clear line of accountability. The staff said they had supervision and were confident in asking for support if needed.

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

- People and relatives felt involved in the service and were encouraged to feedback. A relative of a person said, "I do give my feedback all the time and I am listened to. I got paperwork to fill in about [name] care.
- We saw that questionnaires had been sent out to people and relatives to monitor quality. Some written compliments were, 'People listen to me', 'My privacy is respected,' and 'Excellent, 10/10.'

Continuous learning and improving care

- Quality monitoring systems in place were effective. Management staff completed detailed audits throughout the service, which included observations and spot checks on staff.
- We saw that all aspects of the service were looked at, including health and safety, maintenance, and medication. When errors were discovered, improvements were actioned.
- Staff felt that communication within the service was good, and that team meetings were used as a good forum for information to be discussed and improvements made when required.

Working in partnership with others

- The management team regularly engaged with outside agencies, and were open to working in partnership with others. This included a number of health and social care professionals who were employed by the local authority, but were based on site within the service.
- The service worked openly with the local authority and local clinical commissioning group who funded some people's care.
- We found the management team and staff team to be open, honest, and willing to listen and communicate with us throughout our inspection.