

Devon County Council

Greenfields

Inspection report

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Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service well-led?	Good ●
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Summary of findings

Overall summary

Greenfields is a service which provides personal care and support without nursing for up to five people. The service is run by Devon County Council and gives younger people with learning and physical disabilities short breaks and day care. At the time of the inspection four people were using the service. Breaks can be from one overnight stay to several weeks depending on people's needs and wishes.

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 the Care Quality Commission (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.

Based on our inspection of key areas safe and well-led, we found:

Right Support:

The service gave people care and support in a safe, clean, well equipped, well-furnished and well-maintained environment that met their needs. 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.

Right Care:

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. Staff were able to respond to people's individual needs and preferences. Staff understood how to protect people from abuse. The service worked with other agencies and healthcare professionals to ensure the care provided met people's needs.

Right Culture:

People received good quality care and support because trained staff could meet their needs and wishes. We observed staff knew and understood people well and were responsive. On the day of inspection it was evident staff knew people well. A relative we spoke with at the service when we asked if people were safe told us, "Definitely, they are outstanding, wonderful people, so friendly and helpful. Nothing is too much for them."

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

Rating at last inspection and update:

The last rating for this service was Good (published 20 October 2017).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

Follow up

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe? The service was safe.	Good ●
Is the service well-led? The service was well-led.	Good ●

Greenfields

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.

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

This inspection was carried out by two Inspectors.

Service and service type

Greenfields 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. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because the service is small and we wanted to be sure there would be people using the service at the time of our visit.

What we did before the inspection

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 also reviewed additional information we held about the service, this included previous inspection reports and statutory notifications. A statutory notification contains information about certain incidents and events the provider is required to notify us about by law.

During the inspection

We spoke with the registered manager and observed care interactions between people and staff at the service. At the time of our inspection, the people using the service were either unable to communicate verbally with us, or may have been distressed by us speaking with them.

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 comment directly on their experiences.

We reviewed a range of records including people's care records, records relating to safety checks including fire safety and accident and incident records. We also reviewed medicines records and records relating to monitoring and quality assurance.

Following our site visit we contacted 9 healthcare professionals to seek their views on the service and received feedback from 3 of them. We spoke with four members of staff and three people's relatives. We also received further clarification and documentation from the service to validate evidence found.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question Good. The rating for this key question has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse as there were suitable reporting and escalation procedures for safeguarding. The provider had policies in place.
- People at the service appeared safe and at ease in the company of the staff that supported them, all interactions we observed were positive.
- All of the relatives we spoke with were very confident people were safe. One commented, "Definitely, they are outstanding, wonderful people, so friendly and helpful. Nothing is too much for them."
- The provider ensured staff received training on how to safeguard people. Guidance showing different types of abuse and internal and external reporting processes was available.

Assessing risk, safety monitoring and management

- Risks to people were identified and managed. Where able, the service had worked with people to be involved in managing risks individual to them both in the service and the local community.
- There was active engagement with other health professionals to ensure appropriate advice and support was provided to minimise risks. Feedback we received from the healthcare professionals we contacted about risk management and care provision was positive.
- The environment and equipment were regularly assessed and serviced. This included checking the safety of systems such as electricity, gas and water.
- Regular checks were conducted on fire safety equipment. Personal Emergency Evacuation Plans (PEEPs) assessed the level of 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 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.

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. In care homes, 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.

- There was nobody subject to any deprivations on their liberty at the time of our inspection. One person had a court of protection order for the care they received at home.
- The provider demonstrated they knew how to assess people's capacity if they lacked capacity to make certain decisions. Where required, best interest decisions had been completed and recorded.
- Staff received training in the MCA and how it applied to their roles as part of the provider's continual training programme.

Staffing and recruitment

- There was sufficient staff deployed to meet people's needs and keep them safe from avoidable harm.
- Staffing numbers were adapted to meet people's assessed needs. People's level of support needs changed frequently due to the service type.
- The service was not using agency staff. Rotas were planned in advance and existing staff covered annual leave or unplanned sickness where needed.
- The service followed safe recruitment processes. This included checks on identity, previous employment and Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People's medicines were managed so they received them safely.
- There were safe and effective systems for managing medicines. Due to the service type, medicines were frequently changing in line with different people using the service.
- There were no medicines that required additional security at the time of inspection, however appropriate storage facilities were available if required.
- Audits were undertaken to ensure people were receiving their medicines as prescribed. The checks also ensured medicines remained in date.
- Where people had 'as required' medicines such as pain relief, protocols were in place for this.
- Staff received medicines training and regular assessments were completed to ensure they remained competent to carry out this task.

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.

Visiting in care homes

- People were supported to see visitors in line with current UK Government guidance.
- At the time of our inspection, there were no restrictions on people's relatives and friends being able to access the service and see people living at Greenfields.

Learning lessons when things go wrong

- There were systems that ensured accidents and incidents were reported and monitored by the service management to identify any patterns or trends.
- Supporting records showed that following an accident or incident, relevant details were recorded, and a record of any action taken was evident. This helped to reduce the risk of further accidents or incidents.
- Staff were able to explain the processes and procedures they followed following a fall or incident to ensure it was reported correctly.

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 Good. The rating for this key question has remained 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

- There was a governance framework in place to monitor and assess the quality and safety of the service. This included internal audits by the registered manager and at provider level by a resource manager. Where required, identified actions from audits were completed.
- There was a defined staffing structure. Staff understood their job roles, lines of communication, and accountability.
- The provider invested in staff by providing them with appropriate training to meet the needs of all individuals using the service.
- There was a business continuity plan in place to allow the service to protect people and continue to operate effectively in the event of an unforeseen incident.
- Notifications were submitted as required. A notification is information about an event or person which the service is required to inform CQC. Due to the nature of the service, statutory notifications were minimal, however the registered manager understood when they were required.

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

- The registered manager promoted a culture of person-centred care and was clearly passionate about providing the best outcomes for people at the service.
- The registered manager was clearly committed to their role and achieving good outcomes for people. A relative we spoke with commented, "The staff are very good, [registered manager] is an excellent manager and that permeates down to all the staff."
- In addition to the positive interactions we saw, all of the relative feedback we received was very positive about all aspects of the service. One relative, when asked about the service said, "We're just over the moon with it. The difference between where she was before and now is phenomenal they really deserve praise, they're wonderful people."
- Staff feedback was also positive about the leadership of the service and their employment. One staff member told us, "It's amazing – it is somewhere I can see myself never leaving. It is very nice and professional and the boss is the best boss I have ever worked with and the clients are great. It's just a fantastic place."
- Staff commented on how they felt the positive working environment impacted positively on the outcomes for people at the service. One comment a staff member said was, "I think it is probably the relationship between the staff and the clients, it is the respect the staff give the clients."

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 the responsibilities under the duty of candour legislation and to be open honest when things had gone wrong.
- The provider had appropriate policies in place for this legislation.

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

- There were systems in place to ensure the involvement and views of people and those important to them were sought.
- Resident surveys showed positive feedback when people were asked for their views on the level of care they received, the staff that supported them, the service environment and the activities they could be involved in. An overview of the survey results was produced for management and staff to see.
- Relative surveys completed also evidenced positive feedback. Comments within the surveys reviewed included, "Greenfields is an excellent respite centre, which we are very happy with."
- Staff had the opportunity to feedback on their employment and contribute ideas to the service through meetings and surveys. A recently completed staff survey showed positive results and meeting minutes showed staff feedback was important to the registered manager.

Continuous learning and improving care and working in partnership with others

- The provider and registered manager had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible.
- As part of the service development, a RISE (Recognising Independence, Skills and Empowerment) scheme had been introduced. This supported people to transition into more independent accommodation such as supported living following extended stays in other healthcare settings. The registered manager was very proud of this scheme and we saw examples of where this had impacted very positively on people's lives.
- There was a service improvement plan in place that was aimed at driving continual improvement and progression within the service.
- The service worked with other health and social care professionals in line with people's specific needs.
- The feedback we received from healthcare professionals who were currently working with the service to achieve good outcomes for people was very positive. One comment was, "The manager is very approachable and will do anything she can to help, going over and above."
- Regular reviews and communication with third party healthcare professionals and people's relatives took place to ensure people's current and changing needs were being met.