

## Gainford Care Homes Limited

# The Grove

### Inspection report

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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

### About the service

The Grove is a care home that provides a short-break service for up to eight people with learning and physical disabilities. Two rooms at the service can accommodate people with physical disabilities who use wheelchairs. At the time of the inspection 61 people used the service at least once during the year. People's visits range from a couple of days to a week-long stay. The home can also provide a crisis service for people who may need to stay somewhere for a little longer.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People told us they enjoyed their visits to the service and felt staff ensured they had an enjoyable holiday. They described how staff knew them well, provided them with all the support they needed and how this was the best short-break service they had used.

The registered manager and staff consistently demonstrated they valued and respected the people who used the service. The staff were passionate about supporting people to enjoy their stay and have a holiday experience. The staff team consistently considered how to enhance people's lives whilst they stayed at the home and offered a wide range of activities and outings for people to go on.

Staff were committed to delivering a service which was person-centred. Some people used Makaton and other sign language, but communication plans did not contain information about what signs meant. The registered manager stated they would ask families to help staff produce dictionaries of what signs meant for the person.

The registered manager planned bookings in advance and co-ordinated them to reflect people were compatible and there were enough staff on duty. The staffing levels were increased or decreased in line with the number of people at the service and their needs.

Staff took steps to safeguard vulnerable adults and promoted their human rights. Incidents were dealt with appropriately and lessons were learnt, which helped to keep people safe. People's support needs were thoroughly assessed and reviewed prior to each visit to ensure the information the home held remained accurate.

Staff actively promoted equality and diversity within the home. Staff respected people's cultural and

religious beliefs and practices. 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.

Staff supported people to manage their healthcare needs and promoted their wellbeing. When necessary, external professionals were involved in individuals care. The staff supported people to eat varied, appetizing meals. Medicine was administered in a safe manner.

Thorough checks were completed prior to staff being employed to work at the service. Staff had received appropriate training and supervision. The provider had enabled staff to access a varied and extensive range of condition specific training. The staff had found the training they received assisted them to significantly improve people's quality of life but felt they would benefit from more practical training around working with people who displayed distress behaviours and sign language. The regional manager immediately put measures in place to support staff access this training.

People's voices were of paramount importance in the service. The registered manager understood how to investigate and resolve complaints.

The service was well run. Systems were in place which effectively monitored how the service operated and ensured staff delivered appropriate care and treatment.

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

Rating at last inspection

Good (report published 8 August 2017).

Why we inspected

This was a planned inspection based on the rating at the last inspection.

Follow up

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, 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.

# The Grove

## 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

An inspector and inspection manager completed this inspection.

#### Service and service type

The Grove is a care home. People in care homes receive accommodation and personal care. 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 was an unannounced inspection.

#### What we did

We reviewed information we had received about the service, which included details about incidents the provider must notify us about, feedback from the local authority and professionals who work with the service. 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 the information to plan our inspection.

#### During the inspection

We met five people who used the service. People had a range of verbal communication skills so we spoke with some people and to one person via their speech generator device. We also observed their care being

provided. We telephoned four relatives to talk about their experience of the care and support provided. We spoke with the registered manager, regional manager, two senior care staff and four care staff.

We reviewed a range of records. This included three people's care records, medication records and various records related to recruitment, staff training and supervision, and the management of the service.

After the inspection

We continued to seek clarification from the provider 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 the last inspection this key question was rated as good. At this inspection we found the key question has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- The registered manager critically reviewed all aspects of the service and determined if and where improvements were needed. They ensured staff considered how lessons could be learnt.
- Staff understood where people required support to reduce the risk of avoidable harm. Care plans contained explanations of the control measures for staff to follow to keep people safe. One person said, "They know me well and understand I can be a bit of a handful but are good at keeping me right."
- The provider had effective safeguarding systems in place. Staff had a good understanding of what to do to make sure people were protected from harm or abuse. They had received appropriate and effective training in this topic area.
- The environment and equipment were safe and well maintained. Emergency plans were in place to ensure people were supported in certain events, such as a fire. The registered manager had ensured staff understood the evacuation process and had practiced evacuating the home.

### Staffing and recruitment

- There were always enough staff on duty to meet people's needs. The registered manager carefully planned bookings and matched staffing levels to the number and needs of the people staying. Some people also had their own personal assistant providing one-to-one support during the evenings. A cook and domestic staff were employed at the home, which assisted staff to concentrate on enabling people to make the most of their stay.
- The provider operated systems that ensured suitable staff were employed. Recently there had been turnover of staff. The registered manager had actively recruited staff to fill these posts as well as to increase the core staff team.

### Using medicines safely

- People's medicines were appropriately managed. Medicines were safely received, stored, administered and destroyed. Clear protocols were in place for the use of 'as required' medicines.
- Records showed, and staff confirmed, they had received training in medicines management and they had been assessed as competent in this area.

### Preventing and controlling infection

- The home was clean, and people were protected from the risk of infection. Staff had received infection control training and said they had plenty of personal protective equipment such as gloves and aprons.

# 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 we found the key question 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

- The registered manager had ensured comprehensive holistic assessments were completed for people who used the service. These were regularly reviewed and updated as people's needs changed.
- People's care was delivered in line with evidence-based guidance. The registered manager was aware of a range of best practice, including recent updates in oral care. Health passports and action plans were in place and up to date. The registered manager ensured this informed the care plans, which assisted staff to support people to achieve effective outcomes.
- Over the last year there had been a marked change to the team. New staff told us they found the assessment record assisted them to support each person. One staff member said, "It is a bit daunting having different people coming to stay each week but I do find the care records give me lots of information and this plus other staff help me prepare for each guest."

Staff support: induction, training, skills and experience

- Staff had the skills and experience to support people. They received a comprehensive programme of training. New recruits completed the Care Certificate and shadowed experienced staff for their first few shifts. Staff had regular supervision meetings and appraisals. They told us they felt supported
- The provider changed training provider last year as they found the new trainer offered more in-depth training. Staff found this change positive; they told us they received ongoing refresher training and professional development opportunities. Staff discussed how they had received challenging behaviour training but could benefit from practical training in this area as well as training in using different forms of sign language.
- The regional manager confirmed they would ask the training provider to deliver this training. They also discussed how they would introduce an in-house programme for learning sign languages like Makaton. This involved staff learning a new word in sign language each day they were on duty and staff elsewhere had found this helped them quickly learn the language.

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

- Staff encouraged people to eat a healthy, balanced diet. Staff supported people to express their view about meals they wanted to eat.
- Some people had dietary requirements related to their religious beliefs. The cook ensured separate utensils were kept so when people visited they could be assured the plates, cutlery and cooking equipment had not been used for foods that did not conform to their requirements.
- People indicated they enjoyed the meals. The cook provided home-cooked meals and checked with each



person what they liked then made this for when the person visited. For example, one person loved the curry they made so this was cooked when that person visited.

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

- Staff supported people to access healthcare services when appropriate. Records showed staff had sought the advice from professionals when needed.
- When people visited staff promoted good oral healthcare and supported them to develop good oral hygiene habits. Staff had completed training around supporting people with their oral healthcare and a champion was appointed for this work.

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

- The service was designed to meet the needs of people who used the service. The building was a large, domestic-sized house and reflected the style of good hotel. The provider made sure the home was maintained to a good standard.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 a particular decision and 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 with appropriate legal authority. 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, whether any restrictions on people's liberty had been authorised.

- The registered manager ensured staff followed all the principles and guidance related to MCA and Deprivation of Liberty Safeguards (DoLS) authorisations. For people who lacked capacity appropriate evidence of capacity assessments and 'best interests' decisions were in place.
- People were involved in all decisions about their care. Staff asked people for consent before providing them with assistance and constantly asked individuals what were their preferred choices.

# 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 comprehensive inspection this key question was rated as good. At this inspection we found the 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; respecting and promoting people's privacy, dignity and independence

- Respecting and promoting dignity and independence was a core strength of the service. Relatives said, "They show compassion and care and we cannot speak highly enough of all the staff," and, "Everyone is polite and respectful." We observed a range of patient and dignified interactions by staff.
- People were observed to be happy with support provided by staff. One person said, "I really like coming here and it is much better than other short-break services I have used. The staff treat me well and really do make my time here special." A relative commented, "The staff are wonderful. [Person's name] always enjoys the time at The Grove and it is like a real holiday for them."
- Staff consistently displayed kindness and a caring attitude. The registered manager discussed how they had worked to ensure each person was valued and respected.
- Staff demonstrated they were highly motivated and committed to respecting people's equality, diversity and human rights. Staff told us they were proud to work for a service which supported people's unique differences and empowered people to choose how they wanted to live. The registered manager discussed the work staff had completed to ensure they could meet the needs of new guests who had different religious beliefs and cultural practices.

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

- Staff encouraged people to be involved in the design their own care. People told us staff routinely asked them how they wanted their care delivered and they had looked at their care records.
- The staff contacted relatives to discuss people's support needs and seek their views on what people liked. Staff supported people to air views about how the service was run.
- The registered manager ensured, when needed, people continued to access support from advocacy services whilst on their short-break. An advocate helps people to access information and to be involved in decisions about their lives. Information about advocacy services was on display around the home.

# Is the service responsive?

## Our findings

Responsive – this means that services met people's needs.

At the last comprehensive inspection this key question was rated as good. At this inspection we found the key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- The provider had developed and introduced care records which were specifically designed for short-break services. Care plans were person-centred and contained a lot of detail about each person's background, likes, dislikes, and other key information.

- Care records were reviewed prior to people returning to the service and updated as needed. This meant care plans were meaningful, up to date documents based on people's changing interests.

- The registered manager had organised the booking system, so they knew months in advance who was staying in any one week. This allowed people to choose to stay when their friends were at the service and for the staff to consider compatibility of guests.

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 encouraged to enjoy a wide range of meaningful activities and access the community. People told us, "It is really is a holiday, as we are always trying something new and going different places."

- Staff discussed how the registered manager had positively improved practices since coming into post and now people had flexible activity schedules. They discussed how they offered more evening based activities and looked at events such as discos in the local area people could attend.

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.

- The registered manager was ensuring the records fully met the communication needs of people, as required by the Accessible Information Standard.

- Communication plans clearly detailed how best to speak with people and obtain their views. However, when people used sign language such as Makaton communication plans did not contain specific information on what signs meant for the person. Over time staff had learnt how best to communicate with people but the registered manager confirmed they would ask families to assist them develop communication dictionaries.

Improving care quality in response to complaints or concerns

- People had access to information on how to make a complaint. The registered manager had a comprehensive understanding of how to investigate and resolve concerns.

- People told us they had no concerns but were confident the registered manager and staff would resolve any issues should they arise.

#### End of life care and support

- At the time of the inspection no one was receiving end of life care, but staff had received training.

# 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 comprehensive inspection this key question was rated as good. At this inspection we found the 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.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility; Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The service was well-run. The provider and registered manager's vision and values were person-centred. They made sure people were at the heart of the service. Staff understood their roles, responsibilities and their accountability.
- The provider had a consistent and structured approach to quality assurance. There was comprehensive oversight of all key areas of the service. They critically reviewed the service to determine how further improvements could be made.
- The registered manager and staff were committed to creating an innovative service. Staff were energised by their work.

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

- The provider and registered manager consistently sought the views of relatives and people who used the service. They acted on feedback and used it to continuously improve the service. For example, more evening time activities were being offered, as people found this would enhance their holiday there.
- The provider completed regular surveys with people who used the service, and these showed people were very happy staying at The Grove.
- The service worked in partnership with external agencies to deliver a high standard of care to people. This enabled them and staff to work proactively and flexibly with them to best meet people's needs.

Continuous learning and improving care

- The quality assurance system included lots of checks carried out by the registered manager and staff.
- The registered manager provided strong leadership and their constant critical review of the service had led to noticeable improvements in the quality of the service. They closely analysed the delivery of the service, consulted with staff, people and relatives to identify how they could enhance the service.
- Over the course of the last year, the registered manager had supported staff to refocus on the aim of the service, which was to provide people with a holiday experience whilst using the short-break facility. People confirmed the service had achieved this goal.