

SCA Care

Gore Grange

Inspection report

Jowitt Drive
New Milton
BH25 6SB

Date of inspection visit:
16 December 2019
17 December 2019

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03 February 2020

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

Gore Grange consists of 37 individual flats within an extra care housing scheme. The service provides personal care for older people and adults under 65 years some of whom may be living with dementia, learning disabilities, mental health, physical and/or sensory impairment. At the time of the inspection the service was supporting 20 people with personal care.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

People spoke highly of the staff who had supported them to improve the quality of their lives. People felt safe, secure and well cared for by staff who understood their needs. Individual and environmental risks associated with people's health and care needs had been assessed and measures to reduce risks were in place and understood by staff. People received safe and appropriate support with their medicines where required. Robust recruitment processes were in place which ensured only staff suitable to work in social care were employed. There were enough staff on duty each day to support people safely and meet their needs. Staff understood their responsibilities to identify and report any concerns appropriately.

People's care and support needs were assessed before they started to receive a service. People were involved in developing their care plans in line with their wishes and preferences and consented to their care. This ensured they retained maximum choice and control over their lives. Staff supported people with their nutritional needs where required. Staff received regular supervision, appraisals and training which ensured they were competent and knowledgeable to deliver effective care in line with best practice.

People told us they were very satisfied with the care they received and the way they were treated by staff. Staff involved people in decisions about their care and promoted their independence, privacy and dignity. People received person centred support in line with their care plans which met their individual needs, preferences and choices. People had no complaints but knew who they could speak to should this be the case. They were confident any concerns would be taken seriously and addressed.

The registered manager had created an open and transparent culture. People and staff felt able to contribute their views and opinions and felt involved in the on-going development of the service. Staff consistently told us they felt valued by the management team who were supportive and approachable. The registered manager worked closely with local community groups and commissioners to promote joined up working and improve systems and processes.

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

Why we inspected

This service was registered with us on 13 December 2018 and this was their first inspection.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well.

Details are in our well led findings below.

Good ●

Gore 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

The inspection was carried out by one inspector.

Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted, single household, accommodation in a shared site or building. The accommodation is bought or rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

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 announced.

We gave the service 24 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be available to support the inspection.

Inspection activity started on 16 December 2019 and ended on 17 December 2019.

What we did before inspection

We reviewed information we had received about the service including notifications which the provider is required by law to send us about certain events that happen within the service. We used all of this information to plan our inspection. 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 reviewed feedback we had received about the service from a care professional.

During the inspection

We visited two people in their own homes and spoke with three people in the communal lounge to find out about their experiences of their care. We spoke with the registered manager, the scheme manager and four members of care staff. We spoke with two health care professionals who were visiting the service.

We reviewed a range of records including those relating to the management and monitoring of the quality of the service such as audits and surveys. We reviewed three people's care records and pathway tracked two people's care. Pathway tracking is when we check to ensure people had received all the care they required. We looked at two staff recruitment records and three staff supervision and training records.

After the inspection

The registered manager sent us further information we had requested. We received feedback from a social care professional who had been working with the service.

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.

Systems and processes to safeguard people from the risk of abuse

- Robust systems were in place and followed by staff to keep people safe. People told us they felt safe and well treated and could raise concerns if they felt anxious. One person said, "It's very reassuring. I feel secure." Another person told us, "I feel safe. Oh yes!"
- Staff had received training in safeguarding people and understood how to identify and report any concerns. They had access to the provider's safeguarding policies and guidance on their mobile phones and information was on display in the staff room.
- The registered manager and nominated individual were in the process of completing training to qualify them to deliver safeguarding training in-house.
- The registered manager had made appropriate referrals to the local authority safeguarding team and to the Commission when required.

Assessing risk, safety monitoring and management

- People had been assessed for individual risks and guidance was in place for staff in how to manage these, such as the risk of falls. For example, staff were reminded to ensure people had their mobility aids in reach and had their personal alarms on before leaving them after a call.
- Environmental risk assessments were completed in each person's home and for each activity, such as using the shower or bath and getting out of bed, to ensure people's safety. For example, mopping up spillages after a shower to reduce the risks of slipping. One person told us, "I have a grab rail to get up from bed and rails in the bathroom. It's very reassuring."
- The provider had implemented an electronic care recording system which staff used to record their visits and the care they had provided. This enabled the management team to monitor that all calls had taken place. The scheme manager told us, "I love it. It makes auditing so much quicker. An alert comes up if there is a missed call or a task isn't completed."

Staffing and recruitment

- Robust recruitment procedures were in place which ensured all staff were suitable to work in a social care setting. The provider made appropriate checks on each staff member before they could commence employment to ensure they had a full employment history, proof of identity and employment references, and received a criminal record check from the Disclosure and Barring Service (DBS). A DBS check helps employers to make safer recruitment decisions.
- There were enough staff deployed on each shift. The provider was pro-active and planned their recruitment and staffing levels to meet people's needs. The scheme manager completed weekly staff rotas in advance which ensured all visits were covered. Where people received one to one hours this was recorded on the rota with allocated named staff assigned to complete this.

- People told us they thought there were enough staff on duty. One person told us, "There's always someone around if you need them."
- Staff told us they had enough time to spend with people. Comments included, "I have enough time to do everything. It all gets done" and "I don't have to rush."

Using medicines safely

- Where required, people were supported to manage their medicines in a way that maintained safety but also promoted their independence as much as possible. For example, some people only required prompting or reminding to take their medicines. Other people required staff to administer their medicines to them.
- People confirmed they were satisfied with the way they received their medicines. One person said, "They [staff] get them [medicines] out for me or remind me if I forget."
- Staff received training and competency checks which ensured they had the skills and knowledge to administer or prompt with medicines safely.
- Staff maintained records of when people had taken their medicines on the electronic care system, and this was monitored by the scheme manager to ensure all medicines had been taken as prescribed. Any queries or missed medicines were highlighted and could be easily and quickly investigated. Spot check observations were carried out by the management team to ensure staff were administering medicines safely.

Preventing and controlling infection

- Staff understood when to use personal protective equipment (PPE), such as gloves and aprons when delivering care to people. The management team carried out spot checks to ensure staff were maintaining expected standards, including the use of PPE. One person confirmed, "Yes. They [staff] always wear gloves and aprons."

Learning lessons when things go wrong

- There were robust procedures in place for reporting, recording and investigating incidents and accidents. Action was taken to reduce the likelihood of reoccurrence. Staff were kept informed of any changes to people's care as a result of incidents or accident investigations.

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.

This is the first inspection for this newly registered service. This key question has been rated good. 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 established a positive working relationship with the commissioning teams to ensure the initial assessment process was detailed and effective. This ensured all relevant information was available which helped to ensure people's needs could be met effectively. Assessments included, for example, people's personal care, mobility, communication and nutritional needs, medical history and any allergies. This information was used to develop person-centred care plans which provided detailed guidance for staff in how people wanted to receive their care.
- The provider referenced national research and guidance to assist in developing effective care practices which was made available to staff.

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

- Most people purchased their own food or relatives bought it on their behalf. People's food and drink preferences were recorded in the care plans. For example, "I like a good steak," and "I enjoy most foods, but not spicy or hot." One person told us they liked to go shopping to buy their own food and staff supported them to purchase healthy options. They said, "I do my own shopping at [name of supermarket]. They [staff] check the food for me and stock the freezers." This was reflected in the person's nutrition care plan.
- Where people wished to purchase frozen ready meals to be delivered, the provider helped with this if required. Some people needed assistance from staff to heat their meals up at mealtimes. People told us they were happy with the support they received. One person told us, "They [staff] get my meals. The girls [staff] heat them up for me in the microwave and always make sure I have drinks to hand."
- Staff recorded when they had supported people with their meals and drinks and this was used to monitor people's food and drink intake to ensure they were not at risk of malnutrition or dehydration.

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

- Some people managed their own health care or were supported by their families when they needed to request advice and treatment, such as GP appointments. However, staff understood the procedures to follow in the event of an emergency or who to contact if there was an urgent health concern. People confirmed staff were attentive and observant. One person said, "If I'm poorly they [staff] will call the doctor. They're very good at that." Another person said, "My blood pressure dropped, and I felt unwell. They [staff] called 111 and they sent an ambulance straight away."
- Health professionals confirmed staff were observant and identified concerns promptly. We spoke with a health professional who was visiting a person with a pressure sore. They told us, "They [staff] are very observant. They identified a pressure sore last night and reported it to us and it was triaged for a visit this

morning. They always follow our recommendations [checking and turning]. Wounds don't last very long here."

- A second health professional told us, "The staff follow our advice and protocols. They're on the ball and know what's going on."

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 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.

We checked whether the service was working within the principles of the MCA.

- People told us the staff always asked for their permission before providing care. People had the capacity to make day to day choices about how they wished to receive their care and give their consent. This was confirmed by staff who told us people were able to consent when asked, for example, if they wanted to take their medicines.
- Staff received training in the principles of the MCA and their knowledge was refreshed through staff briefings and supervisions.

Staff support: induction, training, skills and experience

- Staff received on-going training such as safeguarding, MCA, moving and handling and medicines administration. Training was monitored by the scheme manager who informed staff when training was due to be renewed. This ensured staff were up to date with their knowledge and skills and enabled them to provide safe and effective care. Staff felt well supported with their training and development. One staff member said, "I have lots of training. I'm all up to date. It works for me."
- Staff received regular supervision and observed practice sessions which enabled the management team to monitor staff care practice. Staff told us they received regular feedback which enabled them to understand how they were performing and how they could improve.
- All new staff received a thorough induction when they started working at Gore Grange. One staff member told us, "I completed the Care Certificate training. It was five days and covered [for example] food preparation, medication and MCA. I do on-line training too." All new staff completed the Care Certificate as part of their induction. This is a nationally recognised standard of care practice which all care staff should meet.

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.

This is the first inspection for this newly registered service. This key question has been rated good. 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; Supporting people to express their views and be involved in making decisions about their care

- We received consistently positive feedback about the staff from people we spoke with.
- One person told us, "They are very, very good. You couldn't get anywhere nicer. The girls [staff] are brilliant. They respect you. They're very kind, so sweet. They really are lovely. I'm very fortunate to live here." A second person said, "I'm glad I came here. They're so caring. When I'm in my recliner chair they put my feet up for me."
- Health and social care professionals told us the staff were very friendly, welcoming and caring. One health professional told us, "They [staff] are really friendly and respect people. They always knock [on people's doors] when they take me to introduce me." A social care professional confirmed, "A huge amount of care and compassion is shown by all the staff from Gore Grange on every occasion of working with them."
- Staff told us they had time to chat with people and had time to support people at their own pace. This was confirmed by people we spoke with who said they were not rushed and enjoyed spending time with staff. One person commented, "I couldn't wait to get home from hospital. It's more like my family here."
- People told us they felt involved in deciding how they wanted to receive their care and support. They felt listened to when changes in their care and support were discussed and reviewed. One person told us their care needs had decreased and they had discussed and agreed what support they still needed and wanted. A second person told us, "They keep me involved. They talk to me about everything. They just assessed me for a new higher toilet."

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and staff respected people's privacy. People told us staff understood they were entering their home and treated it accordingly. One person said, for example, "They always knock on the door and call out before they come in." Another person told us, "They [staff] are very conscientious, respectful and treat me with dignity when helping me go to the toilet."
- People were encouraged to maintain their independence as much as possible. One person told us they had become much more independent since living at Gore Grange. They said, "I had a huge care package at first. Now I just have help to have a wash and put cream on my legs. I get breakfast myself and go to [Name of supermarket] to do my own shopping. I wanted my own place and to be independent. They [staff] are a very supportive team."
- Staff understood the importance of enabling independence on people's confidence and self-esteem. One staff member told us, for example, "It's so important. I encourage and support them [people] to do what they can. Even something little helps promote their independence."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- Care plans were discussed and agreed with people when they moved to Gore Grange which ensured their care and support was centred around the things that were important to them, such as their faith, relationships, remaining independent and having their preferences met. For example, one person's care plan stated, "Important to me; my relatives and my girlfriend. I speak to my sister for an hour every day." Another person's care plan said, "I like my hair tied back when it gets too long," and "I enjoy a nice cup of tea with milk and no sugar and an occasional glass of wine or [liqueur]."
- Staff told us they enjoyed working at Gore Grange and supporting people to realise their wishes and goals. One staff member told us, "I can see when [person] is ready to take the next step. I've got to know [person], I'm waiting and looking for the signs. It's about what they want from it not what we [staff] want."
- People's care was regularly reviewed with them to check if they were still happy or if they wanted any changes to be made. A care professional told us they had no concerns about people's care. They told us staff were proactive if they identified any concerns about people or their care needs changing and were always willing to take part in reviews and re-assessments.
- A social care professional told us about one person they supported and how the service adapted their support over time. They told us, "As a result of [the person's] changing needs Gore Grange have been providing more support than [the person] is commissioned for and provided clear lines of communication back to our services as well as Adult Social Services around how the needs are changing, how often she requires support and what kind of support they are having to provide."

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.

- People's care plans described their communication needs, for example, "I do not require sign language or other communication aids at this time," and "I wear glasses all the time."
- The scheme manager ensured information was accessible to people, such as pictures of activities in the activities programme for people who found it difficult to read. Staff ensured people had their communication aids to hand each day, such as hearing aids and glasses, and that they were clean and in working order.

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

- Some people were able to access the community and meet up with friends and family independently and others had visitors at home. Staff had a good knowledge of who might be at risk of isolation and preventative measures were built into their day to day support. One person told us they liked their own company and spent a lot of time in their flat but said, "If they take me down for coffee [in the lounge] I'll go down." Another person said, "I don't like being in my flat. I like to keep active. I do a lot of walking and there's always someone here to talk to." A staff member confirmed, "We encourage them [people] to interact and try activities. [One person] goes out for lunches and has coffee every morning. We tried to encourage him to try out the gym, but it wasn't his thing."
- Staff provided a programme of activities in the communal lounge, such as film shows and crafts which enabled people to get together and enjoy activities in a social setting. We observed one person liked to sit in the reception area, watch the world go by and chat to people as they came in and out. They knew the registered manager and scheme manager and had a chat to them as well.
- The registered manager told us they had a pot of support hours for social activities and well-being which they shared with two other local services run by the provider. They sometimes arranged for people from the other services to meet up. A care professional told us since the provider had taken over the management of Gore Grange, "I have noticed an improvement in the wellbeing offer to residents, particularly in terms of activities."

Improving care quality in response to complaints or concerns

- The provider had a robust formal complaints policy in place and people had received information about how to complain. People told us they had no complaints although they knew who to speak with if they had a complaint and were confident any concerns would be addressed. There had been no recent complaints, however, where complaints had been received in the past, these had been dealt with in a timely way. Complaints were monitored by the registered manager, the nominated individual and the Board to analyse any trends and ensure any learning was shared.

End of life care and support

- The service was not currently supporting anyone with end of life care needs. However, the registered manager and scheme manager told us how they had previously worked in close partnership with the district nursing team and the local hospice which had enabled one person to remain at home with appropriate support and pain relief. They had offered compassionate support to the family and provided them with practical advice and information about bereavement and local support services.

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.

- The provider had taken over the management of the service in December 2018. The provider and management team had worked hard to develop a positive, stable and inclusive working culture and had brought the staff team on board with the organisation's vision, values and objectives.
- Staff were happy to be working at Gore Grange, worked well as a team and felt supported in their roles. They understood their responsibilities and worked to the provider's values. One staff member told us, "I'm well supported. If I'm struggling with something I can go to the office anytime or call." Another staff member said, "I like it here. I get on well with everyone." A third staff member told us, "I love it here. I'm always well supported. [The management team] are always there." Another staff member told us, "Handovers and communication here are the best ever. We're a good team, we stick together and get on with everything. [The management team] are always available. [The scheme manager] bends over backwards for this place and rolls her sleeves up and does care too."
- Surveys were used to obtain feedback from people and help drive improvement. For example, people had raised some issues in previous surveys and the provider developed a 'You said, we did' feedback sheet to explain how things would improve. The most recent survey results were very positive and showed improvement with people stating the care was good or outstanding.
- People told us they knew [the management team] who were approachable and available if they wanted to talk to them or raise any concerns.
- The registered manager worked closely with the scheme manager and nominated individual to monitor the quality of the service through a range of audits which had clear action plans where areas for improvement had been identified.
- The electronic care system ensured more effective monitoring of day to day care delivery. The scheme manager told us, "I love the electronic system. It makes auditing so much quicker." Staff had immediate access to information and communication on their mobile phones. This was especially helpful for new staff who were still becoming familiar with people's care and support needs. A staff member told us, "We have a system in the phone. It tells me what I need to do; who, where, when, what, how long. It's all written there for me."

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; Working in partnership with others

- The registered manager had developed a strong, person centred culture within the service. This helped

people to achieve good outcomes and improve their quality of life. For example, one person had been able to reduce their care package as they had become more confident and independent with the support of staff.

- Staff told us they were very happy to be working at Gore Grange. They felt valued and listened to and received feedback during staff meetings and supervision when compliments were received. Thank you cards were given to staff by the management team to acknowledge their contributions to the service.
- Staff meetings and briefings ensured staff were involved, had opportunities to share ideas and were kept informed of, service developments and training. A staff member said, "We all get to have our say. It all works really well." Another staff member confirmed, "We have staff meetings. We can ask questions. There's always something we can look at and discuss."
- Customer forums took place where people could discuss things that were important to them. One person told us, "We had a meeting with [the registered manager], me and two other [people]. They ask how everything's going. If we're happy. They want everyone's opinions. We're trying to get more people to come."
- The management team worked with other organisations to develop positive relationships and improve outcomes for people. A social care professional told us, "We have recently held three publicity events in each of the Extra Care Housing Schemes hosted by SCA [The provider] collaboratively working with New Forest District Council and Hampshire County Council. Feedback has been very positive."
- The registered manager met with the Local Authority every month to look at who might be ready to move into Gore Grange. This had improved the assessment and referral process and ensured placements were appropriate and people's needs could be met.

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 their responsibilities under the duty of candour and had robust procedures in place if things went wrong. They had open and honest communication with people who felt confident in the management team.

Continuous learning and improving care

- The provider had robust procedures in place to identify any learning from incidents and accidents. All incidents were reviewed by the health and safety committee and the Board of SCA to ensure learning across the organisation. Where any learning was identified, this could be shared with staff quickly through the new electronic system.