

Swanton Care & Community (Autism North) Limited

Murton Grange

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service responsive?

Outstanding ☆

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Murton Grange is a residential care home providing personal care to up to 10 people. The service provides support to autistic people and people with learning disabilities. At the time of our inspection there were 10 people using the service. People's rooms were over 3 floors.

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 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.

Right Support

Murton Grange is larger than what is usually considered practicable to provide person-centred care and support for autistic people and people with learning disabilities. However, the service was able to demonstrate they met the principles of 'right support, right care, right culture.' People received safe and effective person-centred care and support from staff who knew them well.

People received exceptionally responsive support from dedicated, highly motivated and compassionate staff. Staff fully understood people's needs and wishes and supported them to achieve their goals. Staff knew people extremely well and supported them to promote and improve their independence and quality of life. People were supported by a stable staff team which provided a consistently high standard of care and support.

People had personalised and tailored positive behaviour support (PBS) plans which met their individual needs. PBS plans provided staff with detailed guidance to promote a positive quality of life for people and identified when they needed to intervene to prevent or reduce the likelihood of distressed behaviour.

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 extremely kind and compassionate care from staff who were passionate about achieving the best outcomes for them. They worked alongside other professionals to empower people to achieve their goals. They respected people's abilities and strengths and went the extra mile to ensure people's achievements were celebrated.

Staff understood and responded to people's individual needs. Staff understood how to keep people safe

and promoted positive risk-taking where appropriate. Staff had training on how to recognise and report abuse and they knew how to apply it. People's medicines were managed safely.

Right Culture

People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the registered manager and staff team. The registered manager led by example and was open about the high expectations they had of all the staff team. Staff supported people to live a quality life of their choosing. They evaluated the quality of support provided to people, involving the person, their families and other professionals as appropriate.

The staff team were valued by the provider and registered manager, and they were recognised for their achievements. Staff were complimentary about the support they received from the management team.

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 17 April 2018).

Why we inspected

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

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

We undertook a focused inspection to review the key questions of safe and well-led only. However, we identified exceptional practices in relation to the provider's approach to person-centred care, so a decision was made to include the key question of responsive.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service remains good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Murton Grange on our website at www.cqc.org.uk

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service responsive?

Outstanding ☆

The service was exceptionally 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.

Murton 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 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

One inspector carried out this inspection.

Service and service type

Murton Grange 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. Murton Grange is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

Notice of inspection

This inspection was unannounced. We visited the service on 29 March and 3 April 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought 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 (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 used all this information to plan our inspection.

During the inspection

We spoke with 7 people who lived at the service and 3 relatives about their experience of the care provided. We spoke with 10 staff including the registered manager, the provider's regional director, 2 deputy managers, 1 team leader, 4 support staff and the cook. Not everybody who used the service was able to communicate verbally, so we spent time observing interactions between staff and people.

We reviewed a range of records including 3 people's care records and 4 medicines records. We looked at 3 staff recruitment records and a variety of records relating to the management of the service including meeting minutes and audits.

After the inspection

We received email feedback from 6 staff members and 5 professionals who work with the service. On 13 April 2023 the registered manager sent us further examples of outstanding responsive care.

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. At this inspection the rating 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 seemed comfortable with the staff who supported them. Relatives felt people were safe. One relative said, "[Person] always seems happy and relaxed there. This has given us great peace of mind."
- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so.
- Staff had training on how to recognise and report abuse and they knew how to apply it.
- Safeguarding records were detailed, and referrals to local authorities had been made appropriately.

Assessing risk, safety monitoring and management

- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well.
- People, including those unable to make decisions for themselves, had as much freedom, choice and control over their lives as possible, because staff managed risks to minimise restrictions. People's care plans recorded what risks were relevant to individuals and measures staff should take to minimise such risks.
- Staff managed the safety of the living environment and equipment well through checks and action to minimise risk. Relevant health and safety checks were up to date.
- Staff could recognise signs when people experienced emotional distress and knew what to do to reduce the need to restrict their freedom and to keep them safe.

Staffing and recruitment

- The service had enough staff, including for one-to-one support for people to take part in activities and visits how and when they wanted.
- The numbers and skills of staff matched the needs of people using the service.
- Staff recruitment and induction training processes promoted safety. Staff knew how to consider people's individual needs, wishes and goals. Safe recruitment practices for staff had been followed. Pre-employment checks included obtaining references and checks with the Disclosure and Barring Service (DBS). The DBS helps employers make safer recruitment decisions and help prevent unsuitable people from working in care services. Some people who used the service participated in interviews of potential staff and enjoyed doing this.

Using medicines safely

- People were supported by staff who followed systems and processes to prescribe, administer, record and store medicines safely. Care records detailed how people wanted and needed to take their prescribed medicines.

- Staff ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) and ensured that people's medicines were reviewed by prescribers in line with these principles.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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 arrangements followed current government guidelines.

Learning lessons when things go wrong

- Staff managed incidents affecting people's safety well. They recognised incidents and reported them appropriately. The management team investigated incidents and shared lessons learned.
- Staff recorded any use of restrictions on people's freedom and the management team reviewed these and looked for ways to reduce them. Alternative methods such as using safety pods to de-escalate incidents were used to good effect.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. At this inspection the rating has changed to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received exceptionally responsive and person-centred care, which met their needs and had an extremely positive impact on their wellbeing. There were several examples of staff identifying changes in people's needs and supporting them to access appropriate support which improved their wellbeing immensely. For example, staff noticed an increase in one person's incidents of distressed behaviour, which often resulted in them injuring themselves. Staff worked closely with other professionals such as the occupational therapist, specialist health team and GP to try new ways of helping the person to excellent effect. This resulted in the person's incidents of distressed behaviour decreasing significantly, which had really improved their quality of life.
- This person was now able to enjoy trips to local country parks, visits to family members, and participate in new activities, all of which would not have been possible 6 months ago. This person's relative said, 'I would like to state how pleased we are with [person's] care. When things have not gone so well, for example, some behaviour issues, all the staff and management have looked to problem-solve in a compassionate and thoughtful way. This has given us great peace of mind.'
- For another person their quality of life had improved significantly as staff supported them with a specific issue around personal care. This person was now able to be more independent with their personal care, which led to them feeling more confident to try new activities and experiences which improved their quality of life immensely. Staff worked with this person on de-sensitisation strategies, which enabled a thorough health assessment. Staff were so impressed that this person had achieved these goals, they nominated them for a 'leaps and bounds' award. The person received a letter on behalf of the care provider congratulating them and awarding them a gift voucher.
- When one person first moved into Murton Grange, they were unhappy, unable to go out or participate in activities, and unable to communicate with their core team. Over several months, this person's core team worked on gaining the person's trust and supporting them at their pace. This person had made tremendous progress and was now able to use public transport to go to the places they enjoy, plan their first holiday, and go out for meals. Episodes of distressed behaviour had decreased significantly, and this person appeared to be a lot happier and settled.
- One of the deputy managers said, "[Person] continues to surprise us every day. They have made so much progress and all the staff are really proud of them. They've got a good quality of life now and a bright future ahead of them." A social care professional told us, "Staff have supported [person] through some incredibly difficult times and have done this with positivity and transparency. Murton Grange have made good progress with [person], supporting them through a number of challenges and their commitment to [person] has had an incredibly positive effect on [person]." We spoke with this person during our inspection. They

told us, "I like my staff and I'm really enjoying going out."

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

- Arrangements for social activities were innovative, met people's individual needs, and followed best practice guidance so people could live as full a life as possible. One person's relatives were finding it increasingly difficult to make the journey to visit them due to the distance involved. Staff offered to drive the person some of the way to a central meeting point, and to do the same for the person returning to Murton Grange. This substantially reduced the total journey time for the relatives and allowed more frequent visits to the family home, which the person and their relatives really appreciated.
- People were encouraged and motivated to reach their goals and aspirations. They were supported by staff to try new things and to develop their skills. Each person's activities were based on their individual needs and choices. Staff were very flexible in their approach.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The provider was compliant with the Accessible Information Standard. Staff ensured people had access to information in ways they could understand. Staff used a range of different methods to support people's understanding such as objects of reference, picture cards, easy-read material and social stories.
- Staff had a good awareness of individual communication needs. They knew how to facilitate communication and when people were trying to tell them something.

Improving care quality in response to complaints or concerns

- Relatives said if they had any concerns they would speak to staff or the management team.
- The registered manager treated all concerns and complaints seriously, investigated them and learned lessons from the results, sharing the learning with the whole team and the wider service.
- Where complaints needed to be escalated to the regional director or chief operating officer this had been done appropriately.

End of life care and support

- The service was not supporting anyone at the end of their lives at the time of inspection. The registered manager confirmed if someone was nearing the end of their life, their preferences would be discussed sensitively with them and their loved ones and documented accordingly.

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 requires improvement. At this inspection the rating has changed to good. 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

- The registered manager worked hard to instil a culture of care in which staff truly valued and promoted people's individuality, protected their rights and enabled them to develop and flourish. Relatives spoke positively about the registered manager. One relative said, "If I've pointed anything out that I was concerned about [registered manager] was very efficient at solving any problems and would always check with me that any issues had been resolved. For [registered manager] nothing is too much trouble. Her staff are a credit to her, and she expects them to care about the young people who live at Murton Grange as if they were all members of their own families."
- The management team were visible in the service, approachable and took a genuine interest in what people, staff, family, advocates and other professionals had to say. Staff told us the service was well managed. One staff member told us, "The service is very well managed as [registered manager] is always on hand. They come into the handovers and know each service user very well. They are always around the home and the service users are always happy to see them. [Registered manager] spends time with the service users which isn't something I've seen in past employment."
- Staff felt respected, supported and valued by senior staff, which supported a positive and improvement driven culture.
- Managers set a culture that valued reflection, learning and improvement and they were receptive to challenge and welcomed fresh perspectives.
- Management and staff put people's needs and wishes at the heart of everything they did.

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

- The registered manager had the skills and knowledge to perform their role and a clear understanding of people's needs.
- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support.
- Staff were committed to reviewing people's care and support on an ongoing basis as people's needs and wishes changed over time.
- Senior staff understood and demonstrated compliance with regulatory and legislative requirements.

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

- People, and those important to them, worked with managers and staff to develop and improve the service.
- The provider sought feedback from people, those important to them and staff and used the feedback to develop the service.

Continuous learning and improving care; 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 provider invested sufficiently in the service, embracing change and delivering improvements.
- The provider had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible.
- The registered manager understood the duty of candour requirement and acted upon it appropriately.

Working in partnership with others

- Staff worked well in partnership with other professionals such as health facilitation teams, care co-ordinators and advocates, which helped to give people using the service a voice and improve their wellbeing.