

Stepping Stones Resettlement Unit Limited

Dean Grange

Inspection report

Elton Corner
Newnham
Gloucestershire
GL14 1JG

Website: www.steppingstonesru.co.uk/locations/dean-grange

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05 November 2019

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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?

Outstanding ☆

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Dean Grange is a residential care home providing personal care to 5 people with a learning disability at the time of the inspection. The service can support up to 5 people in one adapted building.

Through implementing a person-centred model of care and support the service had developed an outstandingly caring person centred culture which placed a strong emphasis on enabling people to develop and maintain their confidence and independence. Such as using public transport independently, taking up voluntary work and spending time without direct staff supervision.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

Staff and management understood how to protect people from harm and abuse. Risks to people's safety were identified, assessed and appropriate action taken and their medicines were safely managed. People were supported by sufficient skilled staff.

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.

People were treated with dignity, respect and kindness and were involved in the planning and review of their care and support.

People received individualised care which reflected their personal preferences, wishes and routines. There were arrangements to investigate and respond to complaints.

The registered manager was visible and accessible to people and staff, providing clear leadership and developing ideas to continually improve the service. Quality checks were made with the aim of constantly improving the service in response to people's needs.

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

The last rating for this service was Good (report published 3 June 2017) at this inspection the rating for this service remains good.

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below

Is the service caring?

Outstanding ☆

The service was exceptionally 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.

Dean 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

Dean Grange is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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 of this information to plan our inspection.

During the inspection

We spoke with two people who used the service, the registered manager and one member of staff. We reviewed a range of records. This included two people's care records and multiple medication records. A

variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We sought the views of professionals involved with people using the service and received the views of a social care professional.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse because staff had the knowledge and understanding to safeguard people. Both people we spoke with told us how they felt safe living at Dean Grange.
- People were protected from financial abuse through appropriate arrangements with daily audits to manage their money.
- Staff demonstrated a clear awareness and understanding of whistleblowing procedures. Whistleblowing allows staff to raise concerns about their service without having to identify themselves.

Assessing risk, safety monitoring and management

- People were protected against identified risks. Risk assessments identified the potential risks to each person and described the measures in place to manage and minimise these risks.
- People were protected from risks associated with legionella, fire, electrical and gas systems, through regular checks and management of identified risks. People had received fire safety training. The premises of the care home were well maintained with work being carried out on the exterior during our inspection visit.
- A plan for dealing with any emergencies that may interrupt the service provided was in place. People had personal emergency evacuation plans.

Staffing and recruitment

- Adequate staffing levels were maintained. The registered manager explained how the staffing was arranged to meet the needs of people using the service. Risk assessments had been completed to allow people to remain in the house without staff at certain times and for a limited time period. Staff were supported by an on-call system and by the registered manager. Staff told us they were satisfied with how the staffing was organised.
- A small staff group supported by a bank of staff meant that agency staff were not used, ensuring people were supported by staff who knew them.
- No new staff had been recruited since our previous inspection where we found people were protected by robust staff recruitment procedures.

Using medicines safely

- People received their medicines as prescribed. People told us they were satisfied with how their medicines were managed and their preferences about how they liked to take medicines were recorded for staff reference.
- Medicines were stored securely with monitoring in place to ensure correct storage temperatures. To ensure the safe management of people's medicines, regular audits took place of medicine administration

records and stock levels. Staff had received training and competency checks to support people with taking their medicines.

Preventing and controlling infection

- When we visited, we found the care home was clean. People told us it was kept clean and they were involved in cleaning communal areas and their individual rooms. Staff had completed infection control training.
- The latest inspection of food hygiene by the local authority in October 2019 had resulted in the highest score possible. Staff and people using the service had completed food safety training as part of enabling them to prepare and cook meals. One person described the importance of checking the temperature of food before it was served.

Learning lessons when things go wrong

- A system was in place to investigate and learn from accidents and incidents. A behavioural support lead provided an analysis of any incidents where people displayed distressed behaviour.
- Following a person tripping on an uneven surface in the garden, plans had been made to level this and another area.

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 this key question has 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

- People's needs were fully assessed which included ongoing involvement of their close relatives and if needed, health and social care professionals.
- Staff completed training in equality and diversity.

Staff support: induction, training, skills and experience

- People using the service were supported by staff who had received training for their role.
- Staff had completed training such as, first aid, fire safety, autism and managing distressed behaviour.
- Staff had regular individual meetings called supervision sessions with senior staff. These were to identify any development needs and support they might require.

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

- People were regularly consulted about meal preferences to ensure they received meals of their choice. People told us they enjoyed the meals and were involved with preparing and cooking meals. A recent house meeting had resulted in some changes to the winter menu.

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

- People told us how they had been consulted and involved in the design and decoration of the environment of the home both in terms of their own individual rooms and communal space including the garden. Monthly house meetings evidenced how people's views about the environment at Dean Grange were translated into changes and improvements.

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

- People were supported to maintain their health, they were registered with a local GP and a dentist.
- People had health action plans and hospital assessments. These were written in an individualised style and described how people would be best supported in the event of admission to hospital or to maintain contact with health services. They also recorded the outcomes of any health appointments, future appointments and observations such as recording people's weight.
- People's oral health care and preferred routines were known by staff. Staff assisted and prompted people to maintain good oral health care.

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. 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 and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Care plans reflected people's ability to consent to receiving care and support. At the time of our inspection there were no people using the service identified as requiring an application to deprive them of their liberty. Staff had received training in the MCA.

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 inspection this key question was rated as outstanding. At this inspection this key question has remained the same. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Respecting and promoting people's privacy, dignity and independence

- Staff excelled at supporting people to develop and maintain their confidence and independence through managing risks and providing individualised support.
- Since the last inspection the service had implemented an innovative person-centred model of care which placed a strong emphasis on developing people's independence and realising their potential and ambitions. The model called 'Imagined futures' had been created by the provider's director of care after attending a conference about the future of care provision for people with a learning disability where the question "What is the imagined futures of the individuals we support?" was raised. A document prepared by the director of Care stated, "The saying "well, they've always been like that, or they've always done that" is no longer accepted at Stepping Stones, and directors and managers alike are acting to change the focus to what can we do to promote and improve the lives of the people we support".
- Dean Grange had been chosen as the first care home in the group to implement the model because the Director of care had identified people were, "able to communicate their feelings and aspirations, and have the capacity to be able to contribute to this process". Staff met with people on an individual basis to gain information about their main aspirations in life.
- In addition, people had requested more independence with daily living and activities. Their desire for more independence and their potential had been recognised and actively promoted.
- In response to this, and with an acknowledgement of the progress individuals had made with their independent living skills, the service had made arrangements for people to be in the care home without a staff presence at certain times when staff were out supporting other people with activities and appointments. This was supported by risk assessment and management to ensure people were safe. People told us they were happy with this arrangement which together with safety training had increased their independence, confidence and self-worth.
- A recent development in response to people's wishes which increased people's sense of independence and confidence was staff no longer accompanied people to take part in certain activities where other supervision was available such as working at a local farm.
- People had been supported to use public transport to travel independently to a local town to have a haircut and visit a café. Staff had supported people by producing an innovative pictorial guide to catching the bus which we saw was displayed in one person's room. Staff had initially accompanied people on the journey to ensure they were confident and arrangements were safe before they undertook the journey unsupervised. One person had also travelled further afield using public transport independently. People we spoke with were clearly proud of their increased independence.
- People were enabled through staff support and training to cook meals on a regular basis for all people

living at Dean Grange. This increased their skills and confidence with meal preparation.

- People had been enabled to achieve their personal goals of taking up activities, voluntary work and seeking paid work. One person had been supported to take examinations in maths and English and had received support in attending interviews and support to open bank accounts and manage their finances. This increased their confidence generally and when seeking work

- One person had recently achieved their desire of going on a holiday abroad, another person had joined a local gym.

The 'Imagined futures' approach acknowledged the importance of all aspirations to people's well-being, "What seems like a small aspiration to us may be huge for the individual and significantly change their lives, and their outlook." to this end people were also supported to achieve independence with daily living tasks such as to be independent with changing and laundering their bedding and cleaning their individual rooms.

Ensuring people are well treated and supported; respecting equality and diversity

- There was an effective and individualised approach to supporting one person with bereavement. The person had previously been unable to visit a relative's grave. Staff took time to locate the grave and supported the person to buy a vase for flowers. They produced a guide using photographs to enable staff to support the person to locate the grave on subsequent visits and leave flowers. This enabled the person to grieve for their deceased relative.

- We observed staff speaking respectfully to people and taking time to respond to people's requests for support or information. People confirmed staff were kind and polite to them. One person described the staff as "good" and told us, "they help you out". A social care professional described, "good relationships" between people and staff.

- Staff showed an awareness of respecting people's privacy. They checked with people if they were happy for us to view their rooms when we looked over the care home. People told us staff knocked on their room doors and waited until asked to enter.

- One person's care plan detailed how staff should support them to maintain their appearance and the prompts to use to achieve positive results.

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

- People were involved in decisions about the care and support they received.

- People were able to use the services of advocates with information available about an advocacy service. Advocates help people to express their views, so they can be heard. One person had recently used the services of an advocate.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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; 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 received care that was personalised and responsive to their needs. People had detailed support plans and 'person-centred plans' to guide staff in providing personalised support. Information was provided for staff reference about a person such as their likes and dislikes. One person told us the best thing about living at Dean Grange was, "it's quiet".
- People had plans in place to guide staff with supporting them to manage and reduce the impact of any distressed behaviour.
- People were supported to take part in activities and interests both in the home and in the wider community. People attended a gym, worked on a local farm and took part in voluntary work with a community gardening project.
- Recreational activities were organised such as trips out to pubs, playing pool and darts and a trip to the seaside. One person told us they were planning to go Christmas shopping.
- People were supported to maintain contact with family members through visits to them supported by staff.

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.

- Menus and information about activities had been prepared and were in use in an accessible format.
- People's support plans contained detailed information for staff to refer to when communicating with people.

Improving care quality in response to complaints or concerns

- No complaints had been received since before the previous inspection. A system was in place to manage complaints appropriately. Information about how to make a complaint was available in each person's file in a suitable format using pictures, symbols and plain English. The process of making a complaint had been discussed with people at a recent house meeting.
- Minutes of house meetings demonstrated how people using the service were able to express their views and raise any issues. If people did not attend the meeting, an individual discussion was held with them about the issues discussed.

End of life care and support

- End of life care was not currently being provided.
- Peoples wishes and plans for the end of their life had been recorded for future reference where this was known.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 ensured they met CQC's registration requirements by continuing to meet all necessary regulations, by displaying the home's current inspection rating and completing and forwarding all required notifications to support our ongoing monitoring of the service.
- The provider was aware of and had systems to ensure compliance with the requirements of the duty of candour. (The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment).

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

- The values of the service included "providing an ethical, person-centred service with integrity, dignity and empathy; respecting, nurturing and empowering Service Users and Staff". We saw examples of these values being followed during our inspection visit.
- People and staff were positive about the management of the service. Staff told us the registered manager was approachable and contactable when they were away from the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care; Working in partnership with others

- Regular audits were taking place to support the registered manager to meet the regulatory requirements and identify shortfalls in the service. Actions resulting from recent audits included updating sections of people's care plans in response to changes with their needs and routines. Actions plans had been shared with the provider and records showed when actions had been completed.
- Good working relationships had been established with the local community learning disabilities team and health care professionals to ensure people received the support they needed.
- The registered manager described the planned developments for the service including work on the garden to level and improve the safety of two areas.