

Abbeyfield The Dales Limited

Abbeyfield - Grove House Residential

Inspection report

Grove House
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Abbeyfield - Grove House is a residential care home providing accommodation and personal care to up to 16 people. The service is located on the first floor of an Abbeyfield extra care facility in the heart of the town of Ilkley. Abbeyfield - Grove House provides support to older people and people living with dementia. At the time of our inspection there were 15 people using the service.

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

People were safe and received good quality person-centred care. People and relatives praised the standard of care and said staff were kind, professional and caring.

Medicines were managed safely. There were close links with health professionals and other agencies to ensure people's health needs were met and changes responded to promptly. Risks were assessed and managed safely. Robust systems were in place to ensure people were safeguarded from abuse and poor care. The service followed safe infection prevention and control practises. The home and grounds had been designed to meet people's needs. The environment was homely, safe, and spacious.

There was a consistent and experienced staff team in place. Recruitment was managed safely and staff received good induction, training, and supervision. 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.

The registered manager provided people with leadership and promoted an inclusive and supportive team culture. They were supported by a team of specialist advisors who worked well together to maintain oversight of all areas of the home. The provider demonstrated they were passionate about continuing to improve the service. There was an inclusive and welcoming atmosphere throughout the inspection. A relative said, "The atmosphere is always the same – safe, caring and calm."

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 11 April 2018).

Why we inspected

We inspected due to the length of time since the last inspection.

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 has remained good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Abbeyfield - Grove House Residential 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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Abbeyfield - Grove House Residential

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.

Inspection team

The inspection was carried out by 1 inspector, a regulatory coordinator, and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service. A regulatory coordinator made telephone calls to staff.

Service and service type

Abbeyfield - Grove House 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. Grove House 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.

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 looked around the service and observed care and support in communal areas. We spoke with 9 people and 2 relatives about their experiences of the care provided. We spoke with one health care professional and 9 staff including a volunteer, care staff, the registered manager, director of operations and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed records including 4 people's care records and multiple medication records. We looked at 2 staff files in relation to recruitment, training, and supervision. We also looked at a range of records relating to the management of the home including audits, meeting records and policies.

Is the service safe?

Our findings

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

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

Using medicines safely

- People were supported to receive their medicines safely.
- Medications systems were organised and records well completed. Guidance to staff was up to date, detailed and person-centred. Regular audits were carried out and effective action taken.
- Staff received regular training and their competency was assessed in line with good practise. We observed a staff member gently reassuring a person explaining why their medicines were prescribed.
- Where topical medicines were prescribed, they were administered safely. However, we found some creams had been stored in people's bedrooms without a detailed risk assessment being carried out. We discussed this with the registered manager and this was addressed.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from abuse and possible harm.
- People and relatives said they felt safe. One person said, "I feel very safe. The staff are always willing to assist me." A relative said, "We never worry [name of person] is at risk here. The staff are so caring and gentle."
- Staff received safeguarding training and demonstrated a clear understanding about how to recognise and report abuse and poor care.
- The registered manager understood their responsibility to refer any safeguarding matters to the appropriate agencies. Safeguarding was an agenda item in all team meetings.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's health, safety and wellbeing were assessed and a range of assessments were in place which were regularly reviewed.
- People told us they felt safe. One person told us they had a pendant call bell. They said, "We can call for help very easily. It gives me reassurance that I can be independent but can call for help easily if needed."
- Staff understood people's needs well. The provider used an electronic care planning system. Staff spoke positively about this. One staff member said, "Risk assessments are up to date and provide the information we need. They are very helpful. I have no concerns about people's safety."
- The premises were very well maintained. There was a maintenance team on site which meant any issues were dealt with promptly.
- The provider learned lessons when things went wrong. Accidents were recorded and action was taken to mitigate the risk of an event happening again.

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.
- Where people lacked capacity to make decisions for themselves best interest decisions were in place. The records could be improved to show more detail about how people, their representatives and other professionals were involved.
- We observed staff routinely offering and observing people's choices.

Staffing and recruitment

- Safe staffing levels were in place. We observed people received support when they needed it. One person said, "There are always enough staff to do things for me."
- The registered manager used a dependency tool to assess how many staff were needed. This was regularly reviewed to ensure there were enough staff to meet people's needs.
- Robust recruitment procedures were in place to ensure only staff suitable to work in the caring profession were employed. The provider ensured new staff were supported with a comprehensive induction and training package.

Preventing and controlling infection; Visiting in care homes

- People were protected from the risk of infection as staff were following safe infection prevention and control practises.
- People and relatives told us the home was clean and tidy. People complimented the housekeeping team and told us they were respectful and kind.
- People were able to receive visitors in line with best practise guidance.

Is the service well-led?

Our findings

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

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

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 had a clear management structure with defined lines of responsibility to monitor the quality of care and drive improvements in service delivery. There were a range of specialists on site to support the registered manager.
- Comprehensive audits were in place. Where issues were identified they were addressed promptly and effectively.
- The provider understood their responsibilities under the duty of candour and were open and honest when things went wrong. They fulfilled their responsibility to report certain incidents and events to CQC.

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

- There was a positive and open culture at the service.
- The provider had systems in place to provide person-centred care which led to good outcomes for people. Staff were able to demonstrate a good understanding and a commitment to delivering person-centred care.
- Feedback about the provider and the registered manager was very positive. One staff member said, "We have a good manager and they are very approachable."

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

- Systems were in place to ask people and staff about their views. The provider had recently carried out surveys which showed high levels of satisfaction.
- Staff felt appreciated and involved in the day to day running of the home. They told us teamwork and morale were good. One staff member said, "We are a good team. We think of each other as family. It is a good place to work." Another staff member said, "We all go above and beyond to make sure people are happy."
- People were actively involved in the local community. This included having regular opportunities to join in events and activities offered in the extra care facility on site.
- The provider worked in partnership with others. Care records showed regular contacts with other health and social care professionals and the GP visited the home weekly. One visiting health professional said, "I have no qualms at all about the care. We can drop in anytime and they are always the same."

Continuous learning and improving care

- The provider had created a learning culture at the service which improved the care people received. They demonstrated commitment to constantly improve.
- The provider had recently introduced champion roles for key areas such as safeguarding and medicines management. The aim of this was to promote the involvement of staff and make further improvements to the quality and safety of care and support.