

Brancaster Care Homes Limited

Pexton Grange

Inspection report

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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

Pexton Grange is a residential care home providing personal and nursing care for up to 57 people. The accommodation is spread over three floors. The home also provides an intermediate care service on behalf of the NHS. This caters for people who have experienced a period of ill health or have been in hospital and require rehabilitation and support for a short period of time to help them regain their independence. Therapy support for those people is provided at the service by the NHS. At the time of our inspection there were 51 people using the service.

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

People were happy with the support they received from Pexton Grange. People we spoke with said they felt safe at the service and staff were kind and caring.

The provider completed a range of pre-employment checks to assure themselves staff were suitable to work at the service. There were enough staff employed to meet people's needs.

Risks to people were assessed and managed well. People received effective support with their medicines and there were suitable measures in place to prevent the spread of infections.

Accidents and incidents were well managed, with procedures in place to learn from these.

The provider had an open, transparent culture. People and staff all had opportunities to provide feedback about the service which was used to drive continuous improvement. Staff told us enjoyed their jobs and were all keen to deliver high-quality care. The service worked alongside other professionals to help ensure people received effective care, support and rehabilitation where appropriate.

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.

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 8 December 2018).

Why we inspected

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

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

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.

Pexton 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.

Inspection team

The inspection was carried out by 2 inspectors 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.

Service and service type

Pexton 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. Pexton Grange is a care home with 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 Healthwatch and the Local Authority. Healthwatch is an independent consumer champion that

gathers and represents the views of the public about health and social care services in England. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 13 people who used the service about their experience of the care provided. We spoke with 8 members of staff including the registered manager and deputy manager, nursing, care and domestic staff. We spoke to 2 relatives of people using the service and received feedback from 3 visiting professionals. We reviewed a range of records. This included 4 people's care records and medication records. We looked at 3 staff files in relation to recruitment, supervision and training. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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.

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

- Risks to people's safety were assessed, monitored, and managed. The service completed detailed assessments and risk care plans which included how to support people to make choices.
- The provider managed risks relating to the premises with regular safety checks, audits, and assessments.
- There were systems in place to learn when things went wrong. Staff recorded all accidents and incidents. Detailed analysis of incidents took place monthly, and the registered manager was involved in reviewing these and implementing learning from this.

Systems and processes to safeguard people from the risk of abuse

- Systems and policies were in place to protect people from avoidable harm.
- People were protected from the risk of abuse. Managers and staff were aware of their responsibility to raise safeguarding concerns and liaise with the local authority and CQC.
- All relatives, professionals and staff contacted said they felt people in the service were safe. A person told us, "I feel safe because the staff's excellent, you only have to press the buzzer and they are here, very helpful."

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.
- Staff understood the importance of supporting people to make their own decisions and obtaining consent from people before care was delivered. A staff member told us, "People have as much choice and control as they possibly can, I ask people if they want to support themselves, helping people to be as independent as possible."

Staffing and recruitment

- Staff had been safely recruited. Checks with the Disclosure and Barring Service (DBS) were undertaken.

The DBS helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable people.

- People were supported by enough staff who knew them, and their support needs well. The registered manager advised that they maintain a consistent staff team and have not required agency staff in over a year.
- Staff were suitably trained to meet people's needs, records indicated training was up to date and staff confirmed they felt well equipped to undertake their roles.

Using medicines safely

- People received their medicines safely and as prescribed. Medicines were stored, administered and recorded appropriately. Staff were trained to understand about the safe handling of medicines.
- People were supported by staff who followed clear systems and processes to administer medicines as prescribed. Staff had received training in medicines management and their competency in this area was assessed appropriately.

Visiting in care homes

- People were supported to maintain contact with their family and visitors were welcomed at the home.

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.

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

- There was a positive culture which was person-centred, open and inclusive.
- Staff spoke positively about their work with the people they support and spoke about the satisfaction they felt when someone achieved a positive outcome. A staff member told us, "Its rewarding, to know that we have helped people get up, and get to go home, to regain their confidence."
- Staff felt well supported and felt their opinions were valued. Staff told us, "I feel supported by the management team here, could go to [registered manager] with anything."
- Staff felt able to raise concerns with managers without fear of what might happen as a result.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Appropriate quality assurance systems were in place, members of the management team conducted audits to ensure quality of care and health and safety standards remained high.
- The provider had clear policies and procedures in place. Staff received daily handovers to identify any key issues in the service.
- Staff were knowledgeable about the people they supported, and training was up to date.
- There were suitable systems for monitoring and improving the quality of the service. These included regular checks and audits. Action was taken when things went wrong to help make improvements.

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

- People and their relatives were regularly asked for feedback on the service.
- As part of the services quality assurance procedures, surveys had been sent to people living at Pexton Grange, their relatives and staff. Survey results had been analysed and improvements implemented as a result.
- Meetings with people, their relatives and staff were held where any issues or suggestions could be raised.
- The service worked in partnership with NHS therapy staff to support people's rehabilitation. A member of the therapy team told us, "[there are] very good leadership skills with the management, and a good working partnership with the NHS, I feel a valued member of the team."

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 suitable policy in place in respect of the duty of candour. At the time of this inspection there had not been any recent incidents which required the provider to act under this policy.
- Any incidents or concerns had been shared with the appropriate local authority and/or CQC.