

Scarsdale Grange LLP

Scarsdale Grange Nursing Home

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Scarsdale Grange Nursing Home is a residential care home providing personal and nursing care to up to 52 people. At the time of our inspection there were 49 people using the service.

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

The provider had a system in place to safeguard people from the risk of abuse. Staff received training in protecting people from abuse. Risks associated with people's care had been identified and guidance was in place to ensure staff provided safe care. Medicines were managed in a safe way. The provider had procedures in place to ensure people were protected from the risk and spread of infection. The home was clean and tidy.

Accidents and incidents were recorded, and the home manager completed an analysis to ensure trends and patterns were identified and action taken to mitigate future risks. Health and safety checks of the building and equipment were maintained.

The providers recruitment policy ensured staff were recruited safely and pre-employment checks were carried out. There were enough staff available to respond to people in a timely way.

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.

We observed staff interacting with people and found they provided person centred care and support. People were offered choices and given the opportunity to express their views.

Audits were in place to ensure the service operated to the standards expected by the provider. Where issues had been identified, action plans were devised, and items actioned in a timely way.

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 02 August 2017).

Why we inspected

We received concerns in relation to quality of care, staffing and safety. As a result, we undertook a focused inspection to review the key questions of safe, effective and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe, effective and well-led sections of this full report.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Scarsdale Grange Nursing Home 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?

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 well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Scarsdale Grange Nursing Home

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 3 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

Scarsdale Grange Nursing Home 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. Scarsdale Grange Nursing Home 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 not a registered manager in post. A manager was in post and had submitted an application to register. We are currently assessing this application.'

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since it registered with CQC. We contacted social care commissioners who help arrange and monitor the care of people living at Scarsdale Grange Nursing Home. We sought feedback from Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. 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 contacted social care and health commissioners who help arrange and monitor the care of people living at Scarsdale Grange Nursing Home. We used all this information to plan our inspection.

During the inspection

We spoke with 7 people who lived at Scarsdale Grange Nursing Home and 8 relatives about their experience of the care provided. We spoke with members of staff including the manager, activities coordinator, nurses, team leaders, and care staff.

We looked around the building to assess environmental safety and cleanliness. We looked at written records which included 4 people's care records and 3 staff files. A variety of records relating to the management of the service were also 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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks to people's safety were assessed, monitored and managed. Staff completed assessments and plans which included how to support people. We identified areas within incident reporting where additional detail could have been beneficial, the home manager showed us evidence this was an area of development they were already in the process of addressing.
- Risk assessments and plans were regularly reviewed and updated.
- People lived in a safe environment. Staff carried out checks on safety and any concerns with the environment were identified and rectified. There were suitable systems to evacuate people safely in event of a fire and fire safety systems were regularly tested.

Systems and processes to safeguard people from the risk of abuse

- There were systems to safeguard people from the risk of abuse. The staff knew and understood the procedures for reporting and acting on suspected abuse.
- Staff received appropriate training and had opportunities to discuss their learning with managers and each other to help make sure they understood this.
- The relatives of people using the service felt people were safely cared for. A relative told us, "Everything that I have seen makes me feel that [my relative] is safe. They are wonderful with them, [relative] has such a big smile when they see the carers."

Staffing and recruitment

- Staff were recruited safely and there was evidence pre-employment checks had been carried out.
- Staff told us they received support and supervision sessions from the management team which gave them opportunity to talk about their role.
- We observed staff interacting with people and found there were sufficient staff available to respond to people in a timely way.

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.
- Staff undertook training to understand about safe medicines practices and staff competency in this area was assessed regularly.
- There were regular audits and checks to make sure medicines were being managed safely.

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 in care homes

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

Learning lessons when things go wrong

- The provider had a system in place to monitor accidents and incidents. The management team analysed incidents and used them as learning opportunities to minimise future occurrences.

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 our last inspection we rated this key question good. The rating for this key question has remained 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

- People's needs were assessed and care was delivered in accordance with their choices.
- Staff completed an assessment of each person's needs prior to them moving into the home and regularly thereafter.
- A support plan was created following the assessment process, so staff knew what care each person needed and when.
- We observed staff interacting with people and found they knew people very well and were able to respond to their needs appropriately.

Staff support: induction, training, skills and experience

- Staff were supported to carry out their role.
- Staff received a range of training to help ensure their knowledge was up to date. Staff were happy with the training they received.
- New staff completed an induction to ensure they understood what was expected of them. The induction process included shadowing more experienced staff.
- Staff felt well supported in their roles. Staff had regular supervision discussions with their line managers and received feedback about their performance.

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

- People were supported to maintain a balanced diet and had enough to eat and drink.
- Care plans and risk assessments contained appropriate information regarding nutritional needs where required.
- During lunchtime staff were observed supporting people according to their care plans. We observed positive interactions between staff and people who use the service and there was a relaxed atmosphere.

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

- The service worked with other agencies to achieve positive outcomes for people and people were supported to access healthcare services and support appropriately.
- People's health needs were recorded in their support plans.
- Information from visiting professionals and healthcare appointments was recorded within care plans.

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

- The building met peoples' support needs and was clean, tidy and nicely decorated.
- People's bedrooms were personalised, and people were included in decisions about decorations and furnishings.

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 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.

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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- 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 principles of the MCA and were able to describe scenarios where best interest decisions had been made. Staff also described how they supported people to make decisions.

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 at the service where staff provided personalised care and promoted people's individuality.
- The home manager knew people well and was a visible presence within the service.
- Staff felt well supported and felt their opinions were valued. A staff member told us, "I am happy how things are going. The manager always comes and visits the floor to see how we are doing. Their door is always open too."
- Staff felt able to raise concerns with managers without fear of what might happen as a result.

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

- The management team understood their legal requirements and could evidence notifications had been made to CQC and to the local authority when required.
- The provider and home manager were aware of their duty of candour and were open and honest when things went wrong.

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

- The provider had a system in place to engage with people, their relatives, and staff. Satisfaction surveys were periodically completed with staff, residents and visitors along with resident, relative and staff meetings.
- People at the service, their relatives and staff commented on their ability to feedback about the service. Relatives told us, "There are meetings for relatives to go to and there are surveys" and, "There is information on the notice board about feedback and I have given feedback online."

Continuous learning and improving care; Working in partnership with others

- The home manager used a quality audit system to identify issues and improve care.
- The provider and home manager worked with others ensuring people's needs were met and appropriate professionals involved when required.
- People, their relatives, and staff predominantly felt involved and listened to. They knew the management team well and had confidence to raise any concerns and felt they would be appropriately addressed.

