

Eungella Care Ltd

# Alder Grange

## 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 caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

About the service:

Alder Grange is a residential care home that was providing personal care to 19 people aged 65 and over at the time of the inspection.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

People's experience of using this service:

People were supported by safely recruited staff who had the skills and knowledge to support them in line with their needs. People were supported safely to manage their risks, whilst promoting their independence. People were supported in a clean environment and their medicines were managed safely.

Effective care planning was in place which guided staff to provide support that met people's needs and in line with their preferences. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

We made a recommendation about the presentation of soft or textured food.

Staff were kind and caring towards people and promoted choices in a way that people understood. People's right to privacy was upheld. People were supported to maintain their independence.

People had opportunities to be involved in activities. People and their relatives were involved in the planning of their care, which meant people were supported in line with their preferences. Complaints systems were in place, which people and relatives knew how to use.

Systems were in place to monitor the service, which ensured that people's risks were mitigated and lessons were learnt when things went wrong. People, relatives and staff could approach the registered manager who acted on concerns raised to make improvements to people's care. The provider looked for ways to improve the service people received.

The service met the characteristics of Good in all areas; more information is available in the full report below.

Rating at last inspection:

Good (report published 28 June 2016).

Why we inspected:

This was a planned inspection based on the rating of Good at the last inspection. We found the service continued to meet the characteristics of Good in all areas.

Follow up:

We will continue to monitor the service through the information we receive.

## 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 caring?

The service was caring.

Details are in our Caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our Responsive findings below.

Good ●

### Is the service well-led?

The service was well led.

Details are in our Well led findings below.

Good ●

# Alder 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by one inspector 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:

Alder 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.

Alder Grange accommodates up to 21 people in one adapted building.

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:

The inspection was unannounced.

What we did:

Providers are required to send us key information about their service, what they do well, and improvements

they plan to make. This information helps support our inspections. We reviewed the information we held about the service. This included notifications about events that had happened at the service, which the provider was required to send us by law. For example, safeguarding concerns, serious injuries and deaths that had occurred at the service.

We spoke with six people who used the service and three relatives. We observed care and support in communal areas to assess how people were supported by staff. We spoke with three members of staff, the team manager, the deputy manager, the registered manager and the provider

We viewed three people's care records to confirm what we had observed and what staff had told us. We looked at how medicines were stored, administered and recorded for three people. We also looked at documents that showed how the home was managed which included training and induction records for staff employed at the service and records that showed how the service was monitored by the registered manager and provider.

# Is the service safe?

## Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and looked after. One person said, "I feel safe here, especially at night because it is secure and there are staff to help me if I need them."
- People were safeguarded from the risk of abuse because staff understood how to recognise and report suspected abuse.
- The registered manager had reported safeguarding concerns to the local safeguarding authority to ensure people were protected from the risk of harm.

Assessing risk, safety monitoring and management

- People told us they felt safe when staff supported them. We saw staff supporting people in a safe way. For example; staff helped people to move about the service safely, whilst promoting their independence.
- Staff knew people well and explained how they ensured people's risks were lowered to keep them safe.
- Risk assessments and support plans were in place, which were reviewed when people's needs changed. The records confirmed what we saw and what staff told us.

Staffing and recruitment

- People and relatives told us there were enough staff available to meet their needs. One person said, "I feel safe here because I know the doors are kept locked and everyone is looked after. I think there is enough staff at all times."
- We saw there were enough staff available who were deployed effectively to ensure people received support when they needed it.
- The provider followed safe recruitment practices to ensure people were supported by suitable staff.

Using medicines safely

- People told us they received their medicines when they needed them. One person said, "The staff are very good and if I say I am in pain they make sure I have a painkiller to help me."
- Staff were trained to ensure they were competent in medicine administration.
- Guidance was available for staff to follow when people needed 'as required' medicines, which ensured people received their medicines as prescribed.
- Medicines were administered, recorded and stored safely.

Preventing and controlling infection

- The service was clean and free from odours.
- Staff followed the provider's infection control procedures which ensured people were protected from the risk of cross infection.
- The registered manager carried out an audit to ensure staff were following procedures and the risk of infection was minimised.

#### Learning lessons when things go wrong

- The registered manager analysed incidents that had occurred at the service. This ensured action had been taken to lower the risk further occurrences. Staff were informed of changes to people's support, which ensured lessons were learnt when things went wrong.



# 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

People's outcomes were consistently good, and people's feedback confirmed this.

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

- People told us they liked the food and they had choices. One person said, "I like all the food, it's really nice." Another person said, "The food is Good, we have some choice".
- People's nutritional needs were monitored and managed to ensure they received adequate food and drink which was prepared in a way that met their individual needs.
- We saw the food was presented in an appetising way for people who could eat a normal diet. However, we saw that some improvement was needed to ensure food that was pureed was prepared in a way that looked appetising for people.

We recommend the provider seeks guidance on the presentation of soft and textured foods.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed before they started to use the service. This ensured people received support that met their needs.
- Support plans had been developed with people and their relatives which ensured their preferences and needs were met in all areas of their support. Staff understood people's diverse needs and explained how they supported people in all aspects of their lives.
- Records showed that where diverse needs had been identified such as religion and sexual orientation the provider had followed the requirements of the Equalities Act 2010.

Staff support: induction, training, skills and experience

- Staff told us they received an induction when they started working at the service, which included shadowing and training. A relative we spoke with said, "The staff have a good attitude, and have the right skills needed to help my relative." Staff also had their training refreshed as required.
- Staff had the opportunity to discuss their role and any areas of development during supervision sessions with their line manager.

Staff working with other agencies to provide consistent, effective, timely care

- Staff attended a handover meeting at the beginning and end of each shift. This highlighted any immediate changes in people's needs during the shift. This ensured that people received a consistent level of support from staff.

- Advice was gained from professionals such as occupational therapists and hospital staff. We saw staff followed the advice provided, which ensured people received effective support.

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

- The service had been adapted to ensure people remained safe. Equipment such as a bath seats and toilet seats with grabrails were in place to ensure people were safe whilst promoting their independence within the service.
- There were signs on people's private rooms and bathrooms to aid people's orientation around the service.
- The provider had an environment action plan in place to ensure action was taken where risks to the environment were identified. This also detailed a continual decoration programme for the service.

#### Supporting people to live healthier lives, access healthcare services and support

- People were supported to access healthcare professionals. One person said, "The staff arrange for me to see a doctor if I am unwell and an optician comes to visit me here." A relative said, "There is support from the local GP and community nurses."
- Staff followed advice received from health professionals, which ensured people's health and wellbeing was maintained.

#### 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 with appropriate legal authority. 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 any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- People told us they consented to their care. One person said, "The staff ask me what I want. I am still independent and can say what I want staff to help me with."
- Mental capacity assessments had been completed where people were unable to consent to certain areas of their care. The records showed specific decisions had been made with involvement from family and other professionals to ensure people were supported in their best interests.
- The registered manager had submitted referrals to the local authority where people were being deprived of their liberty to ensure people were supported in the least restrictive way possible.

# 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

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- People were supported by staff in a caring and kind way. One person said, "The staff are very nice here. They look after me well." Another person said, "The staff are lovely." A relative said, "The staff are lovely here. They always make me feel welcome when I visit. I love this care home."
- We observed caring interactions between people and staff. For example; people were comfortable approaching staff. We saw people laughing and smiling with staff when they were being supported.
- Staff provided comfort and reassurance to one person because they were feeling unwell and staff used positive touch to make people feel loved.

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

- People made choices in how they received their care. One person said, "I choose lots of things as I am still quite independent. Yes, I feel the staff listen to me". Another person said, "Staff always ask me before they help me".
- Staff understood people's individual methods of communication and plans were in place to provide guidance. We saw staff speaking with people in a way that promoted their understanding. For example; staff spoke clearly and used short sentence to help people understand. This enabled people to make informed choices about their care.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect. One person said, "The staff are very respectful. They are polite and sensitive."
- Staff supported people with personal care in privacy and respected people's wishes when they wanted to spend time in the privacy of their own rooms.
- Staff were discreet when providing support to protect people's dignity. For example; one person had food around their mouth and staff whispered to them to ask if they could wipe their mouth. The person was grateful for this, smiled and said, "Thank you".
- People were encouraged to maintain their independence through specialist equipment such as mobility aids and specially adapted plates to assist them. One person had a sensory impairment and staff ensured this person could maintain their independence when eating by moving their hand to the plate and placing cutlery in their hands.

# Is the service responsive?

## Our findings

Responsive – this means that services met people's needs

People's needs were met through good organisation and delivery.

How people's needs are met

Personalised care

- People told us they had opportunities to be involved in activities. One person said, "I like the dominoes and some of the games we have. I choose whether I want to take part." We saw another person reading the newspaper who told us they like reading the paper and these were provided for them. Another person told us they often went out with friends for a meal or a coffee which they enjoyed.
- There was an activity co-ordinator at the service who provided stimulation for people during the day. We observed people involved in an activity which was enjoyed by the people involved.
- People and their relatives were involved in the planning and reviewing of their support. This ensured people were supported in line with their changing needs and wishes.
- Staff knew people well and supported people in line with their preferences. The support plans detailed people's preferences and diverse needs which were followed by staff.

Improving care quality in response to complaints or concerns

- People understood how to make a complaint if they needed to. One person said, "I would tell the staff if I had any worries, but everything is good". A relative said, "I would speak with a senior member of staff and they would relay any concerns for me".
- The provider had a complaints policy in place. At the time of the inspection there had been no complaints received at the service. However, there was a system in place to ensure complaints were investigated and responded to.

End of life care and support

- At the time of the inspection there was no one who was receiving end of life care. However, advance decisions had been sought to ensure people were supported in line with their wishes at this time of their lives.

# 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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

### Leadership and management

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- There was a quality assurance system in place, which the registered manager followed in practice. Where the quality audits had identified an issue, the registered manager had acted to ensure improvements were made. Discussions were held with staff to ensure they were aware of any changes in people's support needs.
- The registered manager carried out unannounced spot checks at the service to ensure staff performance was monitored.
- The registered manager understood the responsibilities of their registration. Notifications had been submitted to us as required by law, such as deaths and safeguarding.
- The rating of the last inspection was on display within the service and on the provider's website.
- The provider had systems in place to ensure the registered manager was undertaking their role effectively and working in line with regulatory requirements.

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- People and relatives felt able to approach the registered manager. One person said, "I know all the management. I see them around all the time and we have a chat" We observed people spoke with the registered manager, who gave them their time and listened to what they wanted.
- Staff we spoke with were positive about the registered manager and the provider. One staff member said, "[Registered manager's name] is very approachable and supportive. I can speak with them about anything."
- The registered manager promoted the values of the service, which the staff followed in practice. The registered manager and provider have attended meetings to share and receive good practice initiatives with other providers and professionals. This showed the registered manager continually sought to improve the service they provided.

Engaging and involving people using the service, the public and staff

- Feedback was gained from people and relatives through questionnaires. The results of the questionnaires were analysed and a report produced to show how the feedback had improved the service. This was made available to people through the provider's newsletter.

- Staff meetings were held regularly. Staff told us the registered manager listened to any suggestions they made to improve the service. One staff member said, "Staff meetings are good and it is a chance for us to receive any updates. We can also raise any concerns we have. Anything I have raised has been sorted out straight away."

#### Continuous learning and improving care

- Staff told us they had opportunities to undertake further development and the registered manager actively sought condition specific training; such as sensory impairments. This meant staff were supported to continually develop their skills and knowledge.
- The provider continually strived to make improvements to the service people receive. The provider was nominated by the GP to take part in a pilot for consultations via Skype. Skype is the ability to have a spoken conversation with someone over the internet using a software application whilst viewing by webcam. The provider was asked to provide feedback on the effectiveness of this service. The registered manager told us this was an opportunity for them to be involved in future changes to improve the service people received.

#### Working in partnership with others

- The registered manager worked with other professionals, which ensured people received safe and effective support in all areas of their lives. This included people's physical health needs and support with people's emotional wellbeing.