

HC-One No.2 Limited

Grampian Court

Inspection report

Grampian Drive
Peterlee
County Durham
SR8 2LR

Tel: 01915864839
Website: www.hc-one.co.uk

Date of inspection visit:
28 June 2023
10 July 2023

Date of publication:
31 August 2023

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

Grampian Court is a residential care home providing personal care to up to 57 people. The service provides support to older people, some of whom were living with dementia. At the time of our inspection there were 56 people using the service.

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

People told us they felt safe living at Grampian Court. People and relatives told us they were very happy with the quality of care provided. The home was clean, tidy and maintained to a high standard. There were good infection control practices in place.

Staff were aware of safeguarding arrangements and knew what action to take to keep people safe. Risks to people were identified and detailed assessments were in place, to ensure risks were managed safely. Health and safety checks were up to date. There were enough staff to meet people's needs. Staff were recruited safely and appropriate checks were carried out. Medicines were managed safely.

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 had good oversight of the service. Quality checks were effective in identifying and generating improvements to ensure the safety and quality of the care people received. People and relatives said the service was well managed and they would recommend the service to others. Staff worked effectively alongside other health and social care professionals to ensure people's needs were met and their health was promoted and maintained.

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 3 May 2018).

Why we inspected

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

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.

We undertook a focused inspection to review the key questions of safe and well-led only. 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 remains good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Grampian Court 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.

Grampian Court

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.

As part of this inspection, we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by 1 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

Grampian Court 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. Grampian Court 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. We visited the service on 28 June 2023.

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 spoke with 11 people who used the service and 6 relatives when we visited the service. We spoke with 13 members of staff including the registered manager, the area director, the deputy manager, 2 senior care assistants, 3 care assistants, the head housekeeper, the head chef, the administrator, 1 wellbeing co-ordinator and the maintenance officer. We looked at 4 staff recruitment files and records relating to health and safety checks.

After the inspection

We received further information from the registered manager on 10 July 2023, which included 6 people's electronic care records, multiple medicine records and other records relating to the management of the service.

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. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and relatives felt the service was safe. One person said, "Yes I feel safe; there's always someone around if I need help." A relative commented, "I think (family member) is very safe here. They've been moved to a bedroom close to the senior's desk, so they can be seen or heard if they're in difficulty."
- People spoke positively about the care provided. One person told us, "I was in a terrible state when I came here. The girls (staff) here were so good to me, it helped me loads. I couldn't get out of bed, but now I'm fine, and can walk again." Another person said, "I came here from hospital after surgery. It was just for 6 weeks' respite care, but I asked if I could stay permanently. I just feel comfortable here. Staff here have really helped me with things I couldn't do on my own if I still lived at home."
- People were protected from the risk of abuse. Staff received safeguarding training and knew how to recognise and report any concerns.
- The provider had systems in place to protect people from harm. The registered manager understood their responsibilities and any concerns were acted on appropriately.

Assessing risk, safety monitoring and management

- Risks to people's safety and welfare were identified and managed. Staff knew people well and were aware of people's risks and how to keep them safe. People's care plans included risk assessments about individual care needs and guidance on how to reduce such risks.
- Fire drills and checks on fire safety equipment were undertaken regularly. Each person had a personal emergency evacuation plan (PEEP) which contained details about their individual needs.
- Regular planned and preventative maintenance checks were up to date. When issues were identified these were rectified quickly.

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.

- For people who did not have capacity to make their own decisions, mental capacity assessments were completed, and 'best interest' decisions were made and documented appropriately.

Staffing and recruitment

- There were enough staff to meet people's needs promptly. Staff supported people in a calm, kind and professional way
- Safe recruitment procedures were followed. Appropriate pre-employment checks were carried out which included a Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Medicines were managed safely. People's medicines records contained enough information to ensure staff supported them with the correct medicines, at the correct times.
- Staff were trained in how to administer medicines safely. Their competence to administer medicines was kept under regular review to ensure their skills and knowledge remained up to date.
- People received their medicines as prescribed. Staff were patient and respectful when they supported people to take their medicines.

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.
- There were no visiting restrictions, which was in line with current government guidance.

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 recurrence.

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. At this inspection the rating 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

- People and relatives said the service was well managed and they would recommend it to others. One person told us, "This place is very well managed, it runs very smoothly." Another person said, "[Registered manager] is very nice. I just have to ask if there's something I want, and she sorts it out."
- There was a positive culture and ethos at the service which was driven by the management team. The registered manager led by example and actively promoted person-centred care, which improved people's quality of life. The registered manager knew people well and was a visible presence within the service.

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 registered manager understood their legal responsibility to be open and honest if or when something did not go as planned.

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

- Quality assurance systems were effective in identifying and generating improvements within the service. Where further actions were needed these were followed up in a timely way. The provider had good oversight of the service.
- The registered manager and staff understood their roles and responsibilities. When an incident occurred, this was investigated thoroughly, and lessons were learnt where appropriate.

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

- People and relatives were supported to provide feedback about the service. Suggestions were followed up and changes were made in response to feedback.
- Staff meetings were held regularly. Staff told us they had plenty of opportunities to provide feedback about the service and that they felt well supported by the management team.

Working in partnership with others

- The management team and staff had effective working relationships with other organisations and professionals to ensure people's needs were met and their health promoted and maintained.

