

New Care Grappenhall (OPCO) Limited

Grappenhall Manor Care Centre

Inspection report

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Date of inspection visit:
26 January 2024
30 January 2024

Date of publication:
20 February 2024

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

Grappenhall Manor Care Centre is a residential care home providing personal and nursing care to up to 70 people. The service provides support to older people, some of whom live with dementia. The service also provides short term care for people who require a period of rehabilitation following a stay in hospital. At the time of our inspection there were 36 people using the service.

Accommodation was across 3 floors of an adapted building. Each floor had access to outdoor garden areas or terraces and had separate adapted facilities.

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

People received a caring service and felt supported and valued as individuals. People told us they were treated with respect and were happy living at Grappenhall Manor Care Centre. People liked the food available, could access a wide range of social activities and had formed trusting relationships with the staff team.

Risk assessments and appropriate care plans had been developed to meet people's needs. People were involved in developing their care plans which were person centred. Changes were made as people's needs changed.

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.

People received their medicines as prescribed and were supported to access healthcare and other specialist services. The staff also worked with other professionals and organisations to ensure positive outcomes were achieved for people.

Staff were recruited safely, and staffing levels were safe.

The service was well-led and staff felt supported by the registered manager and wider management team.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 9 May 2023 and this is the first inspection.

Why we inspected

The inspection was prompted in part due to concerns received about safeguarding and poor care as well as the quality of food available to people. A decision was made for us to inspect and examine those risks.

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

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 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 ●

Grappenhall Manor Care Centre

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

This inspection was carried out by 2 inspectors.

Service and service type

Grappenhall Manor Care Centre 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. Grappenhall Manor Care Centre 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.

Inspection activity started on 26 January 2024 and ended on 8 February 2024. We visited the location on 26 January 2024 and 30 January 2024.

What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals who work with the service. 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 observed interactions between staff and people who used the service. We also used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with 8 people and 3 family members about their experience of the care provided. We also spoke with 3 visiting professionals and 1 friend of a person who used the service.

We spoke with 10 members of staff including the registered manager, deputy manager, quality manager, maintenance manager, a member of the training team, carers, nurses, domestic staff, the chef and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included 6 people's care records and multiple medication records. We looked at 7 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed.

After the inspection

We spoke with a further 2 members of staff by telephone.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Systems were in place to protect people from the risk of abuse. Staff received safeguarding training and understood the actions they must take if they felt someone was being harmed or abused. Staff told us they were confident any concerns would be acted upon and treated seriously.
- Referrals had been made to the local authority safeguarding team when abuse had been suspected and investigations had been completed.
- There was a system in place to record and monitor accidents and incidents. Accidents and incidents were reviewed on a regular basis by the registered manager and the provider. This enabled them to analyse trends and identify any lessons learnt.

Assessing risk, safety monitoring and management

- People's needs were appropriately assessed. Risk assessments had been completed and detailed care plans had been developed to minimise any risk to people's health and wellbeing.
- People told us they received safe care. Comments included, "It is perfect here for me and my condition. It could not be better. I was bedridden but I can now get into a chair" and, "When in your room, they will check on you."
- Throughout our inspection, we also observed safe working practices, such as moving and handling being carried out.
- Routine checks on the environment and equipment were up to date and certificates were in place to demonstrate this.

Staffing and recruitment

- Staffing levels were safe. There were enough staff on duty to respond to people's needs.
- People spoke positively about the staff and the care they received. We were also told staff responded promptly to requests for care. Comments included, "I don't use the call bell often. But when I do, [staff] respond quickly" and, "[Staff] come quickly. They are like a swarm of locusts. They're absolutely wonderful."
- Visiting health care professionals also commented to us there were always staff around and they were knowledgeable about people.
- Staff were safely recruited. Appropriate checks had been made before applicants were offered employment.

Using medicines safely

- Medicines were safely managed. Records of administration were maintained and in line with best practice. This included when people were prescribed creams.

- Guidance was in place for all prescribed medicines administered on an 'as required' basis. This helped staff to understand why certain medicines were prescribed; and under what circumstances they should be offered to a person.
- Medicines were stored securely and only administered by staff who were suitably trained.

Preventing and controlling infection

- People were protected from the risk of infection. The home was clean and well maintained.
- There was enough personal protective equipment (PPE) throughout the home for staff to use when appropriate.

Visiting in care homes

- People were able to receive visitors without restrictions in line with best practice guidance. A person told us their friend was able to visit them, "Whenever he wants."

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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 were supported to maintain a balanced diet and spoke positively about the quality of food. Comments included, "The food is excellent, lots of choice," "The food is okay so far" and, "The food is brilliant. Can't fault it."
- Menus were displayed, and tables were set in a way which promoted a positive dining experience. We observed staff offering choices and alternatives to the planned menu.
- A person with specific dietary needs told us how the chef had been to visit them to discuss their requirements to ensure they received the diet of their choice.
- Staff were aware of people's nutritional needs and had clear information with regards to this.

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

- People's needs had been assessed. Care plans had been developed based on these assessments, as well as advice and guidance provided by other health and social care professionals.
- A staff member clearly described this process and told us they always had the opportunity to read a person's care plan before they were admitted to Grappenhall Manor Care Centre. They told us, "When someone moves in, we go through the care plan. We also update them."

Staff support: induction, training, skills and experience

- Staff completed an induction and received the training they needed to support people effectively. Staff confirmed they had the opportunity to shadow more experienced staff as part of the induction process. A staff member told us, "Yes, I had a 2-week shadowing period."
- Staff also received ongoing support through supervision and observations of their practice.

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

- Staff worked with other agencies to ensure people received consistent, effective and timely care.
- People confirmed they were supported to access their GP and other health services when required. A person said, "I see my consultant each week. My whole wellbeing has changed since I have been here."
- Families members confirmed staff would contact them with any health concerns. A family member said, "The doctor comes 2 times a week. Any concerns they will see [Name]. The staff will also let me know of any problems."

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

- People had the equipment they needed to be supported effectively and were encouraged to personalise their rooms with photographs and personal items.
- People who used the service and family members spoke positively about the facilities available, such as the spa bath. A family member said, "There is a SPA bath. It's the first time [Name] has been able to bath in a long time. [Name] loves the bubbles." A person also said, "We have a very posh bath with bubbles and lights. It's marvellous."
- The provider was in the final stages of preparing for the opening of the top floor of the service. This had been developed with full consideration of the needs of people who lived with dementia. This included memory boxes outside bedrooms and an open layout so people could move around freely within a safe environment.

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.

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 MCA.

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. Capacity was assessed; where appropriate, DoLS applications had been made.
- During the inspection we observed staff asking people for consent before they delivered care.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were well treated. We observed warm and friendly interactions between people. Staff spoke to people in a respectful manner.
- People spoke positively about the care they received. We were told, "The staff are amazing. They will do what I ask and are perfect," "They go the extra mile with things like doing my hair. I can't have a bun in bed, so they plait it" and, "I am happy with everything. I would give the staff 11/10."
- Family members also spoke positively about the care people received. One told us, "I am confident [in the staff]. They will go out of their way to compliment [Name] and laugh and joke with her."
- Staff took pride in the care they provided. Comments included, "I love what I do. I treat people like my own family members. I love this job," "I have the time to sit and chat with residents. Nobody rushes you" and, "I really love working here."
- Staff considered characteristics protected under the Equality Act 2010. Religious and cultural needs were identified when developing care plans and planning social events and activities.

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

- People confirmed they were involved in decisions about their care. Where appropriate, family members and friends were also involved.
- Staff members we spoke with understood the importance of involving people in making decisions. A staff member told us, "Everyone is well looked after. Everyone is offered choice. We discuss any issues with families when people can't tell us themselves."

Respecting and promoting people's privacy, dignity and independence

- Staff encouraged people to do as much as they could for themselves. Care plans clearly described where people were to retain their independence.
- People's privacy and dignity were upheld. We observed staff knocking on doors and doors being closed before people were supported with care.
- Personal information was kept secure and confidential at all times.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Staff were familiar with people's needs and preferences. Important information was recorded. A person told us, "[Staff] understand your needs and listen to you."
- Staff were kept updated about any changes to people's care needs through detailed handover processes and the care planning system in use.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Activities were available for people. This reduced the risk of social isolation. Activities were planned and a list displayed around the home so people could choose what they wanted to participate in. One person told us, "There are always activities happening."
- Some people were cared for in bed. This did not create a barrier to participating in activities which were important to people. A staff member described a person who had been unable to get out of bed to see a bagpiper who came to the home recently for Burns Night. The bagpiper played directly to the person whilst they were in bed. This experience was described by the staff member as, "Very emotional."
- A person told us they had recently celebrated their birthday and there had been, "A great big fuss. Like I was The Queen."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The communication needs of people were assessed and understood.
- Information about the home was available in different formats and languages upon request.

Improving care quality in response to complaints or concerns

- A complaints policy was in place and information on how to make a complaint was clearly visible. Records were maintained.
- People confirmed they knew how to raise a complaint and who they would complain to.

End of life care and support

- Care plans demonstrated personal wishes were documented.

- Where appropriate, Do Not Attempt Cardio-Pulmonary Resuscitation (DNACPR) orders were identified clearly in care plans.

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.

This is the first inspection for this newly registered service. This key question has been rated 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; 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

- People living at Grappenhall Manor Care Centre told us they were happy living at the service and received person-centred care.
- Family members also spoke positively about the positive culture at the service. We were told by family members they were always made to feel welcome when they visited.
- Staff we spoke with told us the registered manager was very supportive and felt confident in sharing any concerns. Comments included, "I will be honest and say I think it is amazing here. It's the most person-centred place I have worked in. Staff are lovely, so relaxed. [The management team] are also very lovely" and, "I love working here. I feel really supported."
- The registered manager demonstrated an understanding of their responsibilities under duty of candour.

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

- Systems were in place to monitor and review the quality of care and experiences of people. Regular audits were completed and demonstrated a commitment to continuous learning and improving care.
- The registered manager understood their responsibility for notifying the Care Quality Commission of events that occurred within the service and we saw that accurate records were maintained.

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

- The registered provider sought the views of staff, people who used the service and family members/other visitors through regular meetings. Records were maintained of any actions taken and people told us the registered manager was approachable if they wanted to share their views.
- Information contained within care plans demonstrated the staff at Grappenhall Manor Care Centre worked in partnership with other agencies.