

Ideal Carehomes Limited

Foley Grange

Inspection report

Silverwoods Way
Kidderminster
DY11 7DT

Tel: 01562543366

Website: www.idealcarehomes.co.uk

Date of inspection visit:
03 October 2023

Date of publication:
10 November 2023

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

Foley Grange is a residential care home providing the regulated activity accommodation for people who require personal care. Foley Grange accommodates 66 people in one adapted building. The service provides support to older people who may have dementia, mental health, or sensory impairment care needs. At the time of our inspection there were 36 people using the service

People's experience of the service and what we found:

People felt safe and supported by the staff who worked at Foley Grange. Staff recognised different types of abuse and how to report it. The registered manager understood their safeguarding responsibilities and how to protect people from abuse. People's care had been planned and potential risks to people had been identified, with mitigation in place to protect people from potential harm. There were enough staff on duty to keep people safe and meet their needs. People's medicines were managed and stored in a safe way. Recruitment processes were robust to ensure safe employment of new staff. The home was clean and staff followed safe infection control practices.

People's care needs had been assessed and planned, and any changes to people's planned care was identified. Staff received training and support to care for people in line with best practice. People were supported to have a healthy balanced diet and enjoyed a varied choice of home cooked food. Staff worked with external healthcare professionals and followed their guidance and advice in support people in line with best practice. 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 were supported by staff who treated them well. One person said, "very pleasant doesn't feel like a hospital, it's like home from home." Staff treated people as individuals and respected the decisions they made. Staff treated people with respect and maintained their dignity.

People's care was delivered in a timely way, with any changes in care being communicated clearly to the staff team. People were supported to engage in a range of activities. People were supported to pursue interests which were individual to them. People had access to information about how to raise a complaint. People's end of life care needs were met in line with their preferences in a respectful and dignified way.

The provider had systems in place to monitor the quality of the service provision and drive improvement in all aspects of the service provision. People, relatives and staff were involved and engaged throughout. External professionals worked with staff to provide good outcomes for people.

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

Rating at last inspection

The service was registered with us on 25 November 2021, and this is the first inspection.

Why we inspected

The inspection was prompted in part due to concerns received about support to people with dementia and mental health care needs. 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. However, we did find that Foley Grange supports people who have a lower level of care requirements and promote people's independence as far as possible. Where some people's dementia care needs or mental health needs have increased, due consideration is given as to whether staff can continue to safely support people within the home environment or if alternative placement is needed.

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 ●

Foley 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 team consisted of 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

Foley 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. Foley Grange 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

The 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 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 spoke with 9 people who used the service and 3 relatives about their experience of the care and support provided. We spoke with 10 staff, which included the registered manager, deputy manager, care manager, regional director, team leaders, care staff, housekeeping staff, and kitchen staff. We requested feedback from 4 external health and social care professionals and received feedback from 2 professionals. We reviewed aspects of 3 people's care records, 4 staff recruitment records, training records, staff rotas and documents in relation to the governance 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.

This is the first inspection of this newly registered service. This key question has been rated good.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- All people we spoke with told us they felt safe by the staff who supported them. One person said, "yes, I do feel safe, secure somehow." Relatives also felt their family member was kept safe. One relative said, "Very safe, can't fault it, very attentive, happy, and jolly which makes you feel better. Never had so much fuss."
- Staff protected people from abuse and understood the providers safeguarding procedures to keep people safe from harm.
- The provider and registered manager understood their responsibilities regarding the action to take to protect people from harm and took action to protect people where required.

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- People and their relatives told us they were asked about the person's care needs prior to moving into the home. People and relatives felt staff knew how to keep them safe, with any changes being communicated well.
- Records showed that where people's care needs changed, action was taken to address this. For example, where a person had experienced a fall, discussions were held with the person around how they could support them to prevent future falls. The person told us they were happy with the additional staff support and had not experienced further falls since.

Staffing and recruitment

- The provider took exceptional actions to ensure there were sufficient numbers of suitable staff.
- People and relatives told us the right number of staff supported them with their care. People told us staff were responsive to their requests for support. One person said, "I ring [the call bell] at 05:30am for my early morning tea, [staff] usually come fairly quickly." We saw staff supported people in timely way to keep them safe.
- Staff told us there were sufficient staff to meet people's needs. They told us how they had quality time to spend with people and did not always feel rushed.
- The registered manager told us they used a dependency tool to help them determine staffing levels. They told us they were over-staffing the home to ensure people were supported to a good standard, while also preparing to accept new people into the home.
- The provider operated safe recruitment processes. Staff were recruited safely prior to starting their role. Relevant and appropriate recruitment checks, such as the Disclosure and Barring Service (DBS) were in place. The 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

- People were supported to receive their medicines safely.
- We saw staff followed safe practice when administering medication. Staff checked if people needed medicine prescribed 'as required' such as pain relief, to ensure people were comfortable.
- People received their medicines in line with their prescription by staff who were trained to do so.
- The provider was following safe protocols for the receipt, storage, and disposal of medicines.
- The provider completed spot checks of their staff to ensure they followed safe administration practice.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- People told us the home was always cleaned to a high standard. One person said, "Very good I think, very good cleaners, they do my bed while I'm at breakfast."
- The home appeared clean and well kept. The domestic staff confirmed they had sufficient equipment and chemicals needed to help them keep the home clean.
- Furnishings were well kept and in good condition to help promote the hygiene of the home.
- Regular audits were undertaken to ensure the areas of the home were maintained to a high standard.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- The provider had systems and processes in place to identify where things had gone wrong and had acted upon these to reduce the risk of them from happening again.
- The management team adapted and reviewed their checks and audits to ensure these were robust at identifying care and support was being provided in line with best practice.
- Where incidents had taken place, these were reviewed so that learning could be undertaken to prevent them from happening again.

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 of this newly registered service. This key question has been rated good.

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

- People's needs were assessed and care and support was delivered in line with current standards to achieve effective outcomes.
- People's protected characteristics under the Equality Act 2010 were identified as part of their need's assessment. Staff members could tell us about people's individual characteristics and knew how to best support them. This included, but was not limited to, people's religious beliefs, cultures and personal preferences. People told us they were supported to continue to practice their faith, one person said, "I'm free to do what I want, I take a taxi to church every Sunday."

Staff support: induction, training, skills and experience

- The service made sure staff had the skills, knowledge and experience to deliver effective care and support.
- Staff told us there was a good skill mix of staff, experienced staff worked alongside new to care staff to support them in their role.
- People told us the staff had the confidence and the skills to care for them and meet their needs. People felt confident when being supported by the staff.
- Staff told us the provider supported them with training which was beyond the mandatory training they had experienced in other care settings. One staff member told us, "We've done [lesbian, gay, bisexual, transgender, queer or questioning, intersex and agender or asexual] (LGBTQIA+) which I haven't been offered in any other service I've worked at before." The staff member told us the training helped to give staff a better understanding and confidence when having open conversations with people.

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

People were supported to eat and drink enough to maintain a balanced diet.

- People's dietary needs had been assessed, and plans were in place as to how to meet them.
- People told us they enjoyed the food which was prepared for them, with a good variety and choice of different meal options to suit people's individual needs. People had support to maintain their hydration, people's intake was monitored if deemed necessary.
- We saw mealtimes were a positive experience for people, staff were attentive to people's requests and supported people in line with their individual needs. Where people did not want the food offered, alternatives were given.
- Where people required a specific texture of food to support their safety, the food was prepared in the kitchen to ensure it met the correct standards.
- People's weight was monitored in line with their individual needs, and where weight changes were identified, action was taken to address this promptly. For example, if a person had unexplained weight loss, increased monitoring and contact with external healthcare professionals was made.

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

- The provider ensured the service worked effectively within and across organisations to deliver effective care, support and treatment.
- When people's needs changed, appropriate referral had been made in response to this. One person said, "The doctor checked me over when I [first] came in, I've seen the district nurse, and the doctor is visiting tomorrow."
- Feedback from visiting professionals was positive, with them reporting that staff understood people's needs well. One professional told us, "They appropriately and in a timely manner refer into our service if they are concerned."
- Staff supported people to attend health appointments, opticians and dental appointments, so they would remain well.
- Staff were aware of people's upcoming health appointments, and so ensured people were ready and prepared to attend these appointments on time.

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

- People's individual needs were well met by the adaption, design and decoration of the premises.
- Foley Grange is a purpose-built home. The corridors were wide and had good lighting. People had their own bedrooms with ensuite facilities.
- Directional signage and memory pictures were in use, to aid people living with cognitive impairments to find their way around.
- People had free access to secure outside areas to enjoy. A cinema, café, various lounges, dining room spaces and quiet rooms were also part of the facilities which we saw people using. One person told us, "Facilities are out of this world everything that you want you get." While another person compared the home to a luxury cruise ship. People also told us they were able to bring personal items if they wished.

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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

- The provider was working in line with the Mental Capacity Act.
- People's consent to care and treatment were sought. Where it was deemed people did not have capacity to consent, care was provided in line with law and guidance.
- We saw staff gained consent from people before they provided support.
- The registered manager had monitoring systems for the progress or outcomes of applications for Deprivation of Liberty Safeguards (DoLS) authorisations. This meant some people who were unable to consent to their care may be being deprived of their liberty without authorisation from the local authority. Where it had been deemed a person may be deprived of the liberty, referrals had been made for these aspects to be considered.

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 of this newly registered service. This key question has been rated good.

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

- People were treated well and were shown respect by the staff who supported them.
- People told us they felt respected by staff. One person said, "Staff are kind, helpful, respectful. Everything is nice, I'm quite happy, [staff are] very kind and come and help you."
- We saw staff were friendly and supportive; they knew people well and what was important to them. A professional who visits the service said, "I find Foley Granges staff to be attentive, caring and concerned about their residents."

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

- People were supported to express their views and make decisions about their care.
- People felt listened to and involved with decisions about their care. People shared examples of how staff supported them to do things which were important to them.
- Relatives where appropriate had been involved in their family member's care.
- Staff recognised what was important to people and ensured they supported them to express their views and maintain their independence as much as possible.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence were respected and promoted.
- All people we spoke with told us they were treated in a dignified and respectful way. One person said, "The maintenance staff are friendly, laundry staff and cleaners chat, carers are all lovely."
- Staff were respectful towards people and maintained people's dignity, for example, to protect their clothes when eating.
- Staff told us they respected people's privacy by ensuring information about their care and support was only shared with their consent.

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 of this newly registered service. This key question has been rated good.

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

- People were supported as individuals, in line with their needs and preferences.
- People's choices, needs and preferences were clearly identified within people's care plans.
- People told us staff respected their wishes, such as when they would like to get up in the morning and when they would like to go to bed.
- Staff told us there was a good level of information about people's care needs and preferences held within their records.

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 provider was meeting the Accessible Information Information.
- People's communication needs were understood and supported.

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

- People were supported to maintain relationships and take part in social activities which were important to them.
- People shared with us how staff promoted and encouraged their passions, and how these extended into the local community. For example, people frequently went to the local leisure centre for swimming or to play bowls. We saw people enjoying these activities, those attending told us it was nice to get out and use the local facilities. People also used a minibus which meant they had greater accessibility to attend external events and outings which were further afield.
- People's friends and family were able to visit when they wished to. Relatives told us they also attended events that were celebrated in the home.
- Staff sought information about people's lives prior to moving into Foley Grange so they could continue to support people in a way which was individual to them. For example, attending the local knitting clubs, the local steam train station, the Woman's Institute (WI), gardening and visiting garden centres. One person told us, "I like to sing, always sang, very fond of singing, I sang in various choirs." The activities co-ordinator heard this conversation and told us of the various singing activities this person had taken part in and that they were in the process of starting a choir, to sing church music as many of the people living there attended church.

- The registered manager told us they were helping people achieve life long dreams, and was helping support one person with a hot air balloon ride.

Improving care quality in response to complaints or concerns

- People's concerns and complaints were listened to, responded to and used to improve the quality of care.
- People told us they knew how to raise a complaint if they needed to. All people we spoke with did not have any concerns, but felt confident their concerns would be acted upon.
- The registered manager told us they have not received any complaints, however they did have a procedure in place if this was required.

End of life care and support

- People were supported at the end of their life to have a comfortable, dignified and pain free death.
- People's care records showed discussions had been held with people, and where appropriate their relatives about their end of life care wishes.
- We read comments from relatives expressing their thanks to staff for the support given during this time.
- Staff understood how to support people who needed end of life care and support.
- Staff sought support and worked with external healthcare professionals to ensure the right medicines and equipment was in place, should a person require these at the end of their life.

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 of this newly registered service. This key question has been rated good.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- There was a positive and open culture at the service.
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- People told us they had the opportunity to share their views of the service, through monthly meetings, one to one conversations or a suggestion box. There was also a spokesperson for people living in the home, the person in this role said, "I feel like I am doing something useful." People told us they felt listened too and their comments were acted upon where able. While another person said, "[Registered] manger checks everything is okay, I wouldn't hesitate to go to them, if I tell them anything, they deal with it."
- Relatives told us there were plenty of opportunities to come into the home to engage with the management and staff, such as coffee mornings, relative meetings and care reviews. One relative said, "[Registered manager's name] is approachable, their door is always open, always says hello."
- Staff told us there was a good level communication between the different teams, and they worked together well to provide people with a holistic service. One staff member said, "It's a lovely place to work."
- Staff felt well supported and valued by the registered manager and provider. Staff had supervisions, staff meetings and opportunities to raise any queries or improvements they may have. Staff told us they were supported to progress in their career if they wished, and attend college to support them with this.
- Professionals who visited the home told us staff worked hard to ensure people received good outcomes. With one professional saying, "The management and administration team appear present every time I visit and know why I am there and who I am to see."
- The registered manager was supported by a senior management team, who listened and supported them.

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 understood their responsibilities under the duty of candour.
- Where events had happened in the home, these had been communicated with the appropriate people and external agencies.
- The provider understood their responsibilities for notifying the CQC for other events, such as deaths, serious injuries or DoLS authorisations.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements

in service delivery.

- The provider had systems in place which monitored the performance of the service. These monitoring tools were analysed by senior management to identify any areas for improvement, which were fed back to the registered manager.
- Staff were clear in their roles and accountabilities, each staff member we spoke with was aware of what was required of them. Some staff held champion roles, where they promoted these and acted upon them, for example, the safeguarding champion.
- Regular audits took place for various aspects, such as infection control, people's meal time experience and reviews of people's care records. Where shortfalls were identified these were raised with staff to be addressed. We could see that at the next audit checks were made to ensure the shortfalls were now being acted upon.
- Regular meetings with heads of department were made, to bring a consistent approach to provide people with the right care and support.
- Staff supervisions and competency checks were in place. Staff told us they could request additional training and/or support if they felt they needed this to develop in an area.

Continuous learning and improving care

- The provider had created a learning culture at the service which improved the care people received.
- The provider held regular meetings with managers across their services to share best practice and update on service developments and health and safety alerts.
- The provider had scheduled learning events for managers within the provider group, to ensure their management staff received training relevant to their roles.

Working in partnership with others

- The provider worked in partnership with other organisations to support care provision and joined-up care.
- Professionals who visited the home were positive about the care and support they had seen being offered to people. One professional told us, "The leadership at the home is good and is always available to support the patients and families and myself if I have any queries." While another professional said, "It seems a well run care home with residents well cared for by staff who know them and seem genuinely concerned with their well being, happiness and quality of life."