

# Gracefield Health Care Limited (GHC) Gracefield Health Care Limited (GHC) - 31 St Domingo Grove

## Inspection report

St Domingo House  
31 St Domingo Grove  
Liverpool  
Merseyside  
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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

Gracefield Health Care Limited (GHC) is a residential care home providing personal care for up to 6 people. At the time of the inspection 6 people lived in the home. Accommodation is provided in single bedrooms.

The Secretary of State has asked the Care Quality Commission (CQC) to conduct a thematic review and to make recommendations about the use of restrictive interventions in settings that provide care for people with or who might have mental health problems, learning disabilities and/or autism. Thematic reviews look in-depth at specific issues concerning quality of care across the health and social care sectors. They expand our understanding of both good and poor practice and of the potential drivers of improvement.

As part of thematic review, we carried out a survey with the registered manager at this inspection. This considered whether the service used any restrictive intervention practices (restraint, seclusion and segregation) when supporting people. The service used positive behaviour support principles to support people in the least restrictive way. No restrictive intervention practices were used.

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

Everyone said they felt safe and enjoyed life in the home. People led active and fulfilling lives and either accessed the wider community on their own or with staff support.

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.

Care and support were delivered on an individual basis and the occupants of the home decided their daily routines. Care, support and activities were planned around individual likes and dislikes.

Professionals also spoke extremely highly of the home and how the home was able to support people to have excellent outcomes considering their complex needs.

Thorough recruitment and staff induction were in place to ensure that staff were suitable to work and provide support within the home.

Staff had access to training, all staff had gained or were in the process of obtaining professional qualifications.

Healthcare records were kept to high standards and staff knowledge of individuals was extremely good. This enabled staff to recognise early changes in people and early access to primary healthcare services this ensured excellent continuity of care.

A relative spoke of the exceptionally caring staff who were very obliging and did everything possible to meet

people's needs. They said, "I am more than happy about my [relative] care, other care services weren't able to keep him safe, but they can at Gracefields".

Any minor issues within the home were dealt with prior to becoming complaints.

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

#### Rating at last inspection

The last rating for this service was Good (published 25/01/2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well-led

Details are in our well-led findings below.

# Gracefield Health Care Limited (GHC) - 31 St Domingo Grove

## **Detailed findings**

## Background to this inspection

### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

### The inspection team

The inspection was carried out by one inspector.

### Service and service type

Gracefield Health Care Limited (GHC) 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.

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 before the inspection

We reviewed all the information we held about the provider and spoke with one of the commissioning authorities. We reviewed the notifications sent to us from the provider in line with their legal responsibility.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made judgements in this report.

During the inspection

We looked at one person's care records and checked various records relating to staff administration of medicines. We checked audits and quality assurance reports, incident and accident records, as well as the recruitment supervision and training information for all staff. We visited the care home on 25 July 2019 and met with everyone living in the home and spoke with the people living at Gracefield Health Care (GHC). We spoke with six members of staff including, support workers, senior staff, the deputy manager and the registered manager. We also spoke with one relative and a monitoring officer from a local authority funding people living in the home.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Support staff had received training in safeguarding people from the risk of abuse, they were knowledgeable about their responsibilities.
- The provider had a system in place to record any allegations of abuse, ensure people were safe, and report any allegations to the appropriate authorities. There was a senior member of staff available to support staff in such situations 24 hours a day.
- A relative told us that they felt their relative was safe and well supported in the home. They commented that it was, "The most settled period [Name] had ever had".

Assessing risk, safety monitoring and management

- Risk assessments had the information staff needed to reduce risks and support people to remain safe.
- Staff respected people's choices, autonomy and freedom. Support to help people remain safe was agreed with the person beforehand, involving them in their support planning and taking into consideration any behaviours that could put themselves or others at risk.
- The home worked with people positively and did not use any form of restraint.

Staffing and recruitment

- The provider had taken steps to ensure that there was enough trained staff with the right skills to meet people's needs.
- New staff had been recruited safely including reference checks and applications to Disclosure and Barring Service (DBS) to consider people's suitability to work in the home.

Using medicines safely

- Staff received training in administering medication safely and regularly had their competency checked to ensure they used the safest and best practice.
- There was a monthly audit of the systems used for administering medication. These steps helped ensure people received their medication safely.

Preventing and controlling infection

- Staff provided care using protective equipment that reduced the risk of spreading infections.

Learning lessons when things go wrong

- If something went wrong, or very nearly went wrong; this was recorded by support staff as an accident or incident and appropriate action was taken to ensure the person involved was safe.
- Accidents and incidents were discussed as part of learning at meetings of support staff and senior staff.

- Staff used information about accidents and incidents to look for patterns, learning and opportunities to improve the support provided for people.



# 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 were seen very much as individuals and each person had an individualised care package. This meant they had appropriate staff support to encourage support and activities in line with their preferences.
- People's care plans were reviewed at regular intervals and regular meetings were held to establish the effectiveness of the plan in meeting people's needs.
- Before people moved into the home information was obtained and comprehensive assessments were completed relating to their needs.
- Care plans demonstrated that staff worked alongside people to help them to maintain independence and access the community with support.
- Care plans were thorough and comprehensively covered people's needs and preferences. Care was delivered in line with any limits put in place by authorities other than any restrictions in place under The Mental Capacity Act 2005 (MCA).

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 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Paperwork in relation to MCA and DoLS was clear and could see this was appropriately completed and applications for DoLS had been submitted.
- We saw that mental capacity assessments had been completed to consider whether people were being deprived of their liberty.
- The service supported people to make a variety of decisions relating to their care and support.

Staff support; induction, training, skills and experience

- Staff told us they had ample opportunity to meet the people they supported and time to given time to get to know them through the planned activities and shadowing shifts. Shadow shifts support new staff to work alongside established staff to get to know individuals and their routines.
- There was a clear training program for staff and this was monitored by the manager to ensure staff completed their training requirements.
- Staff told us they were never asked to undertake tasks they did not have the knowledge or training to do.

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

- Staff supported people with maintaining a healthy diet.
- Food was prepared mainly on an individual basis alongside the support staff so that people developed daily living skills. People told us that the food was "good", "we get plenty to eat", "we choose what we want"
- Records were maintained of what people ate and drank to ensure they received enough food and drink.

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

- Care plans contained information relating to the health professionals involved with the person's care. Visits from healthcare professionals were recorded with the outcome of the visit and were up to date and accurate.
- We spoke with somebody from one of the funding authorities who told us that they had regular progress meetings at the home. That they were always kept informed and had been impressed with how the home had managed a particularly hard to place client.

Adapting service design, decoration to meet people's needs

- The home was a large house with accommodation provided on several floors with no lift. We discussed with the owner of the service any plans for the future as we saw that one person's mobility was not so good.
- The owner told us a new home is being developed nearby with easier access to communal and personal accommodation.
- We saw some of the bedrooms which were clean, tidy and furnished with personal items.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question remained the same. 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; Respecting and promoting people's privacy and dignity and independence

- Staff were fully familiar with people's likes and preferences including their previous life experiences. Staff aimed to adapt care and support to maintain their interests, creating a truly person-centred environment.
- We observed staff consistently treated people with a very kind and compassionate manner.
- Staff knew when to support people and when time and space was needed to process information. We heard staff knocking on doors and working in collaboration with people so they remained in control.
- Information was stored confidentially, either in a locked room or a room occupied by staff.

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

- People were involved in the planning of their care. They could clearly express their views and wishes.
- Care plans incorporated how the individual communicated, and how they identified their wishes.
- When people were making unwise decisions by not attending or participating in health appointments or taking medication. Staff recorded their actions and looked for ways to encourage people to maintain good health.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question remained the same. 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

- People were seen very much as individuals and each person had an individualised care package. This meant they had appropriate staff support to encourage support and activities in line with their preferences.
- People's care plans were reviewed at regular intervals and regular meetings were held to establish the effectiveness of the plan in meeting people's needs.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- We spoke with the manager who told us that information could be provided in different formats when and if required.

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

- Staff were knowledgeable in respect of interests and hobbies people had. People were supported to attend events and use community facilities for socialising, playing snooker and shopping.
- People's religious beliefs were upheld as people wished.

Improving care quality in response to complaints or concerns

- The provider had a clear complaints procedure. A relative told us that nothing ever got to be a complaint as the manager always dealt with things and always listened to concerns they may have.
  - Improvements could be made to incorporate any complaints made by people using the service.
- Information was recorded on individuals care planning records, this had not been included as part of the complaints register.

End of life support

- At the time of our inspection nobody was receiving end of life care, although the service did have policies and procedures in place to manage and provide for end of life care.

# Is the service well-led?

## Our findings

At the last inspection this key question was rated as good. At this inspection this key question remained the same.

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

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; and 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 service had a registered manager and a deputy manager. This had created another layer of management to monitor performance and outcomes of the service provision. It also afforded another management level to support the registered manager who was also the owner of the business.
- Staff spoke highly about the management team and the level of support they received.
- Ratings from our last inspection were linked to the provider's website and displayed within the service.
- The manager had informed us of incidents and accidents as required by legislation.
- A comprehensive range of audits and checks were undertaken by the management team and were effective.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a selection of policies and procedures to guide staff in the care delivery, in paper format and on the computer system.
- The senior management team were engaged and transparent throughout the inspection process.

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

- Staff enabled people to retain their independence and supported every aspect of their lives to enable them to continue to live them as fully as they wished.
- People were involved in the development and delivery of their service on an individual basis, through regular reviews, safety checks, surveys and meetings.
- Staff told us that the service celebrated many festivals to reflect the diversity of the people and staff and ensured that any protected characteristics were accepted.

Continuous learning and improving care; Working in partnership with others

- The service worked effectively with a variety of stakeholders. This included health and social care professionals, as well as other organisations.
- There was a strong focus on learning from incidents and adverse events. For example, we saw where things had not gone as well as they could, the service had analysed this in detail and put measures in place to improve the quality.

