

Gateshead Council

Whickham 1

Inspection report

30 Windermere Gardens
Whickham
Newcastle Upon Tyne
NE16 4ET

Tel: 01914885586
Website: www.gateshead.gov.uk

Date of inspection visit:
21 May 2021
16 June 2021

Date of publication:
16 July 2021

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

Whickham 1 is a 'supported living' service which provides people with personal care within their own home. At the time of inspection two people were using the service.

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

People we spoke with were very positive about the service and the staff. People told us about the positive outcomes they had achieved with staff support. We observed warm and kind interactions between people and staff. Staff and the registered manager were working with people to help them become as independent as possible and transition into their own individual homes.

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.

Staff encouraged people's independence and worked with them to set achievable goals to meet their own individual aims. People were supported by a consistent staff team who had been trained to safely support them.

People attended a range of activities in the community and local college. The staff team encouraged people to maintain relationships which were important to them.

During the pandemic the service had worked with people to ensure that they remained engaged and happy. People told us about the PPE staff wore, why it was important and how staff had kept them safe.

Risks people may face were fully identified and mitigated. Medicines were safely managed, and the service worked in partnership with other health care professionals to make sure people received a continuous level of support.

The registered manager completed audits and checks to make sure the service was delivering safe and effective care. Staff were positive about the culture at the service and the support from the registered manager.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support,

right care, right culture. People told us they were provided with choices for everything they did and how they controlled their care. Care plans were person centred and reflected the individual person's goals and aspirations. People were at the centre of the service and the culture of the service supported this.

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 6 August 2019 and this is the first inspection. The last rating for the service at the previous premises was requires improvement, published on 19 March 2019.

Why we inspected

This was a planned inspection to provide the service with a 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 good.

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.

Whickham 1

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 Care Act 2014.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

This service provides care and support to people living in one 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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

We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection

We reviewed the information we held about the service including information submitted to CQC by the provider about serious injuries or events. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We sought feedback from the local authority contracts monitoring and safeguarding adults teams and

reviewed the information they provided. We contacted the local Healthwatch for their feedback. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

During the inspection-

We spoke with two people who used the service about their experience of the care provided. We spoke with three members of staff including support staff and the registered manager.

We reviewed a range of records. This included two people's care records and multiple medication records.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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 for 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

- Policies and processes were in place to reduce the risk of abuse. Safeguarding policies were in place and staff had received training around this.
- People had access to easy read guides around safeguarding and staff knew what action to take if any risk was identified.

Assessing risk, safety monitoring and management

- Risks people may face were fully assessed and mitigated. Positive risk assessments were in place to support people to carry out activities that involved potential risk. Steps were in place to make any risk identified as small as possible. A staff member said, "Positive risk assessments are in place and they are tailored to that person."
- Staff regularly reviewed people's risk assessments and had discussions with people to see if there were any other areas where positive risk-taking assessments may be required.

Staffing and recruitment

- There was enough staff to support people. Staff had all of the required training to safely deliver care.
- Staff were recruited safely, and the provider had all necessary pre-employment checks in place.
- People told us support was provided by a consistent staff team. One person told us, "It's always [staff member] who's here today and takes me out. [Registered manager] is always around."

Using medicines safely

- Medicines were managed safely. The registered manager audited medicines and administration records regularly. Records were accurate and followed best practice guidance.
- People's independence had increased since receiving support and people were encouraged to be as independent as possible with their medicines. One person had worked with staff and their GP to reduce the amount of medicines they required, due to the positive influence of the service.
- People confirmed they received their medicines safely. One person said, "They (the staff) give me them (the medicines) and I take them."

Preventing and controlling infection

- Policies and processes were in place to prevent and control the spread of infection. People had easy read guidance available relating to the COVID-19 pandemic and how to stay safe.
- We were assured that the provider was meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- Reflections were made and lessons were learned from accidents and incidents. The registered manager investigated all incidents and steps were put in place to try to reduce any re-occurrence.
- Findings from investigations were shared with staff and 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.

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.

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

- Holistic assessments of people's care and support needs were completed which reflected best practice guidance.
- People were the decision makers in their care. People chose specific aims to achieve with staff and made decisions about what support they received.

Staff support: induction, training, skills and experience

- Staff had regular access to training and received regular supervisions.
- Staff had completed all of their mandatory training and had carried out further training in areas specific to supporting people.
- Staff received support and guidance from the registered manager. One staff member told us, "We get a lot of support from the manager, he's great."

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

- Staff supported people to eat and drink a healthy balanced diet.
- People told us they chose what they wanted to eat and drink and staff supported them to cook.
- People celebrated events together, for example birthdays, and ate together. One person told us about food they had ordered for cooking and places they liked to go to eat, with staff support.

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

- Staff worked positively with other agencies to make sure people received consistent care from other health care professionals.
- Records showed involvement from the local GP who was working with staff to help people to become independent with their medicines.
- A person told us about the appointments they had attended with other health care professionals and that staff supported them with this.

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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- People's care was delivered in line with MCA and best practice guidance. Staff had received training around MCA.
- People were provided with choices for every aspect of their lives. A member of staff told us, "We support them to make informed choices and take control."

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 treated well and supported by a caring and kind staff team. Equality and diversity policies were in place to make sure everyone was treated fairly, regardless of their age, sex, race, disability or religious belief.
- Staff were positive about the people they supported. One staff member said, "I enjoy it here and love working with the people we support. Every day is different, and I enjoy the challenge. We're making a change to someone's life and its really rewarding."
- People were positive about the support they received. A person told us, "They (staff) are excellent. I love it here."
- During the inspection we observed many positive interactions between people and staff. Staff knew people extremely well and provided support at the right time for the individual.

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

- People were supported to make the decisions around their care and what goals they wanted to achieve. Each person had their own individual pathway which reflected their own personal ambitions.
- Care plans were created in partnership between people and staff. People's choices and wishes were heard and were used as part of the care planning process. For people who could not fully communicate their choices, advocates were involved to make sure that their views were heard.
- Staff told us how they regularly reviewed people's care plans and supported them with decisions. One staff member said, "We support people to make informed choices and take control. We encourage the person to learn new skills and take control of their own decision making."

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and dignity and promoted their independence.
- Staff we spoke with told us about how they had worked with people to increase their independence. One staff member said, "We are a unique service. We assess the person and we support them from the transition into the service and then into transition to become independent so they can be in their own properties and be as independent as possible. It's a great journey with them."
- People we spoke with told us how staff respected their privacy within their home. One person told us, "They (staff) knock on the door."
- People told us about their own individual achievements since being supported by the service. One person described the tasks they could do on their own now with staff support. This included making meals and cleaning. They said, "I can do my own cleaning and make my bed now."

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

- People had holistic assessments in place which reviewed their physical, emotional and social needs. Care plans formed from these detailed the individual's own pathway for what they wanted to achieve and what support was required to meet their goals. A staff member told us, "A tenant pathway is created to show what support they need to achieve their goals in three, six, nine and 12 months. It's about listening to the person and seeing what they want in their life and at their pace."
- Records showed people were part of their care planning with involvement from other professionals and staff.

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.

- People had their communication needs assessed as part of their initial assessments and these were regularly reviewed.
- People could access information in different languages, easy read format and in large print if needed.
- Records showed people had access to guidance, information and documents in easy read format and signed to say they had fully understood.

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 access the community, attend activities and maintain relationships important to them. One person told us, "I talk to my family all the time," and another said, "Friends can come over."
- People were involved in a range of activities. Due to the COVID-19 pandemic the majority of social activities had reduced but staff had worked with people to attend activities outside.
- People were supported to attend local colleges and pursue courses that interested them. Staff had successfully helped one person to start a course in September which was related to computer gaming, and something the person was very interested in.

Improving care quality in response to complaints or concerns

- There was a complaints process in place, which was also available in easy read, which detailed the steps taken if a complaint was received.
- No complaints had been received by the service but the registered manager was aware of the process to

follow.

End of life care and support

- There was an end of life policy in place and staff had received training around supporting people with this, although no one was receiving end of life care at this current time.

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

- There was a positive staff culture that promoted good outcomes for people. A staff member commented, "We have given support and the skills to transition service users from the service into their own homes, it shows how well we've got it right as they are now independent."
- People told us the staff team was positive. One person said, "Staff are supportive. It's my home and they (the staff) are like my family."
- The registered manager was approachable and supportive. One staff member commented, "He's a good manager and knows exactly what to do. He's been there a lot for me and supported me. He gives me the help and support I need. He's honest with me and he encourages us."

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; Continuous learning and improving care

- The provider understood their responsibility to be open and honest when something goes wrong. Apologies were given to people and lessons were learnt.
- Results from audits, investigations, feedback sessions and surveys were used to improve the quality of care at the service.

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

- The registered manager was fully aware of their legal responsibilities and was open and transparent. They submitted notifications to CQC for significant events that had occurred at the service, for example accidents and incidents.
- The quality and assurance systems allowed the registered manager to effectively monitor the quality of care provided to people.

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

- People and staff were asked for their feedback to allow the provider and management team to find ways to improve the level of support provided to people.
- Staff told us they could provide feedback to the registered manager at any time and that they listened to them.
- Staff worked in partnership with others. People told us about other professionals involved in their support,

for example their GP.