

Community Integrated Care Gatesgarth

Inspection report

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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:

Gatesgarth is a residential care home providing personal care and accommodation to five people with a learning disability. The home is a bungalow in a community setting and designed to promote people's inclusion and independence.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

People's experience of using this service:

People received a consistently good service and felt safe with the support they received from the staff. Staff had developed caring and trusting relationships with people, with many staff being employed in the home for over ten years and more.

There was a strong, visible person-centred culture. The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion.

People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent. People were encouraged and supported to engage in activities within the community.

People were safeguarded against the risks of abuse and harm by the systems and by the staff training in place. Risks to people were assessed and mitigated. When incidents took place, the provider reflected on events to help reduce the risk of these happening again.

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 had undertaken training which was regularly updated to ensure they had the skills and knowledge to support people effectively. The registered manager ensured there was always enough staff to provide flexible and responsive care.

People had access to external health professionals to help promote good health and wellbeing. They were encouraged to maintain a healthy diet and had support to take their medicines safely.

The home was well run. There was a new registered manager in post who had a good oversight of the service and was experienced in their role. The staff team were positive about the new manager's input and keen to develop the service further for the benefit of people in the home.

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

Rating at last inspection:

The last rating for the service was good (published 17 February 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.

Gatesgarth

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by one inspector.

Service and service type:

Gatesgarth 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:

This 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. 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 used all of this information to plan our inspection.

During the inspection:

We spoke with three people who used the service and three relatives on the telephone about their experience of the care provided. We spent time observing the daily life in the home and we looked around

the building to check the service was safe and clean. We spoke with five members of staff including the registered manager and care workers. We reviewed a range of records. This included three people's care and medication records. We looked at four 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.

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

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of harm, abuse and discrimination. Staff were well-trained and knowledgeable.
- People and their relatives said they felt safe with the support of staff both in the home and out in the community. One person said, "I feel very safe. If I had any worries I could go to the staff."
- The provider's ethos ensured harassment, discrimination and bullying were challenged. Safeguarding was built into working practice. People were empowered to speak up and to understand the concept of bullying through person-centred stories.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's health and safety were assessed and mitigated. Staff understood where people required support to reduce the risk of avoidable harm. Care plans contained explanations of the control measures for staff to follow to keep people safe.
- People were very well supported to take positive risks to ensure they were able to access the community and live fulfilling lives safely.
- The registered manager and provider promoted an open culture of continuous learning when things went wrong. Safety concerns raised were valued as integral to learning and improvement. The service had recently improved working practices after mistakes had been made when dispensing medicines. They now had two staff to check medicines.

Staffing and recruitment

- People were well supported as staffing levels were carefully monitored to ensure people received prompt care and support to achieve their goals. Staff said that staffing levels were maintained at a good level and they had time to meet people's needs.
- The service followed safe recruitment procedures to help ensure staff were of suitable character to work with vulnerable adults. People were involved in the recruitment process in a meaningful way with support to give feedback.

Using medicines safely; Preventing and controlling infection

- Medicines were obtained, stored, administered and disposed of safely by staff. Staff received training and had their competency regularly assessed.
- People's medication was regularly reviewed and medicines were reduced, where appropriate, to achieve more positive outcomes for people.
- Gatesgarth was kept clean and there was an effective infection control system in place. Staff had access to

personal protective equipment (PPE) such as gloves and aprons. We observed staff using PPE appropriately to prevent the risk of cross infection.

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 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 guidance standards and the law

- The registered manager thoroughly assessed potential new referrals to ensure people's health and care needs could be met by the service. The care plans in place were regularly reviewed and developed with people; there was a strong focus on the outcomes people wished to achieve.
- The registered manager and provider kept up to date with new research, guidance and legislation and used this to train staff and help drive improvement. For example, they had introduced a positive behaviour support model (PBS) of care into the service. PBS is an enabling model of working and positive risk-taking with people with a learning disability. This had resulted in people being able to access more community activities.

Supporting people to live healthier lives, access healthcare services and support; staff providing consistent, effective, timely care within and across organisations: Supporting people to eat and drink enough to maintain a balanced diet

- The service was effective in supporting people to access healthcare services to promote their health and well-being. One relative told us, "They are always very quick to let me know if they have any concerns about [relatives] welfare."
- People's care plans contained detailed information to support people to have enough to eat and drink. Any risks associated such as food allergies or swallowing problems had been included. The registered manager ensured all staff received training on nutrition, malnutrition and hydration.
- We received positive feedback from external professionals about the agencies multi-disciplinary working to ensure good outcomes for people they supported.
- The provider used technology to assist in the effective delivery of care. Some people had movement sensors in their rooms to help keep them safe and people with epilepsy had monitors to alert staff to seizures.

Staff support: induction, training, skills and experience

- Staff received a comprehensive training programme to equip them for the specific needs of people they were supporting. The registered manager had arranged additional training to support people with more specialist health care needs by linking with specialist nurses. One staff member told us, "We had some really useful training from a nurse on tissue viability. This has been great in supporting one person who has skin issues that has definitely improved since."
- Staff told us they were well-supported by the new registered manager and received regular supervision.

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

- The home had been adapted to meet the needs of people in the home. Adaptations were provided to support people's independence, these included accessible bathrooms, ramps and handrails. Some people used sensory equipment to provide a calming 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 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.

- People's rights were protected. People's capacity was assessed and they were supported to make their own decision, wherever possible. Staff sought appropriate consent to care prior to carrying out any tasks and this was recorded.
- Staff had completed training in the MCA and had a good understanding of the principles of the legislation.

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

- Staff had developed strong and supportive relationships with people. Staff consistently treated people in a very kind and compassionate manner. We saw lots of laughter and warm interactions between people and staff. A number of staff had worked in the home for over twenty years told us, "We care from the heart. They are like our family and we treat them as such. If I can make them happy, I'm happy." A person in the home told us of staff members, "I hold them in my heart."
- Each person had their life history recorded within their care records which helped new staff to get to know people to build positive, caring relationships with them.
- The registered manager and staff documented people's diverse needs and assisted them to maintain their different protected characteristics. These are set out by the Human Rights Act. Key values of kindness, respect, compassion, dignity and empowerment were embedded throughout the recruitment and training and staff support process. All staff had training in human rights and equality and diversity awareness.

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

- The service cared about and valued the views of people who used the service. Staff recognised people's communication needs and what was important to people. Care records detailed how people had been involved in developing their care plans and detailed any communication support needs. For example, staff had been trained to understand the communication needs of people with autism.
- Information was readily available about local advocacy contacts, should someone wish to utilise this service. Advocacy seeks to ensure that people are able to have their voice heard on issues that are important to them.

Respecting and promoting people's privacy, dignity and independence

- People's right to privacy and confidentiality was always respected. Staff had a sensitive and caring approach when talking about the people they supported. They understood the importance of protecting and respecting people's dignity and promoting self-esteem. Staff were very positive about people achieving and succeeding at new activities and skills.
- People told us their independence was encouraged. One person told us, "I do lots for myself and staff will help me out with my money if I need it."
- The staff team were knowledgeable about accessing services, so people could have equipment and adaptations to keep them both safe and promote their independence.
- The service ensured people's care records were kept securely. The language used in daily notes and care plans was respectful and was written in a positive manner. Information was protected in line with General

Data Protection Regulations.

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.

The service was tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care. The values that underpin Registering the Right Support were seen in practice at this service. There was clear evidence that the core values of choice, promotion of independence and community inclusion were at the centre of people's day to day support.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People's care plans were personalised and were written with people's input as much as possible. The plans documented their choices, needs and preferences and were reviewed when a person's needs changed. People we spoke with made very positive comments about the support provided and were keen to tell us the interesting things they were doing.
- The new registered manager was reviewing all care plans with each person and the staff team to ensure that they still met people's needs. They were focusing on ensuring the new model of PBS was embed in each plan along with clear actions on communication support.

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 leading fulfilling and active lives and were supported to engage as full citizens within the local and wider community. They were able to be flexible and chose what they wanted to do on a day to day basis. People followed their own hobbies and interests. They regularly chose to go shopping, visit local attractions and go to pubs and cafes. Some people liked to go to concerts and others to football and rugby matches.
- People were supported to maintain and develop relationships with friends and family.

Improving care quality in response to complaints or concerns

- There was a complaints policy in place. This was available in an easy read version. There had been no complaints in the past year. The registered manager told us that any complaints would be taken seriously, learned from and improvements made.

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.

- The service ensured people had access to the information they needed in a way they could understand it and complied with the Accessible Information Standard. We saw an easy to read information about going to

the dentist had been used with one person who was anxious about this.

End of life care and support

- There was no one receiving end of life care at the time of our inspection but people's future preferences and choices in relation to end of life care had been explored where possible. In the past the service had worked with a range of external healthcare professionals to provide compassionate end of life care.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection this key question remained the same. 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; Continuous learning and improving care

- The registered manager and staff team demonstrated a commitment to providing person-centred, high-quality care. People's wishes were highly respected and care was arranged around people's preferences and requirements.
- Health and social care professionals spoke positively about the service. They told us the new registered manager was proactive and keen to engage with them. One said, "The service is well-led with new manager in post, who works well with the team at Gatesgarth to provide better support for their service users."
- The registered manager used relevant legislation and best practice guidelines to drive improvement. For example, using current good practice in healthcare for people with learning disability from the National Institute for Health and Care Excellence.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 was well-organised with clear staffing structures and a well-developed staff development programme.
- The provider and registered manager carried out regular quality audits and any lessons learnt to improve the service were quickly acted upon. The registered manager had recently used a community mapping tool to ensure people were accessing the community as much as they would like.
- The provider had developed policies and procedures and training around the duty of candour responsibility if something was to go wrong. We saw they contacted families and other professionals and had notified CQC of any incidents they were required to tell us about.

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

- The service worked proactively in partnership with other organisations which ensured they followed current practice, provided a quality service and to ensure people they supported were safe.
- One healthcare professional told us, "Gatesgarth staff are a team with good knowledge and are able to identify when appropriate referrals are required. They are open to take advice on board and put this into practice."
- The service supports and encouraged staff to promote equality in how people were treated by the service and the community at large. We saw examples where they had worked to ensure people had equal access to

healthcare.

- The registered manager listened and responded to the views of the people they supported and their family members through annual satisfaction surveys. People were also actively encouraged to comment on care plans and feedback to the management team through regular review meetings.
- Staff spoke positively about the support they received. One member of staff told us, "The manager is really good at listening. If we speak up about an issue there's never any blame. They always say tell us so we can help sort things out."