

Bondcare (Ambassador) Limited

# Elton Hall Care Home

## Inspection report

Elton Village  
Elton  
Stockton On Tees  
Cleveland  
TS21 1AG

Date of inspection visit:  
20 November 2019

Date of publication:  
09 December 2019

Tel: 01642570200

Website: [www.bondcare.co.uk/elton-hall/](http://www.bondcare.co.uk/elton-hall/)

## 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

Elton Hall Care Home is registered to provide accommodation and personal care for up to 70 people, although the layout of the home has been changed and can now accommodate 63 people. At the time of our inspection 49 people were living at the home. Elton Hall provides accommodation and personal care to older people, people with dementia and younger adults with mental health needs.

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

Feedback from people and relatives was overwhelmingly positive. They consistently praised the exceptional caring and supportive nature of the staff at Elton Hall. People told us it was the support of staff that had increased their confidence and wellbeing.

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 were knowledgeable of the Mental Capacity Act and how it may impact on people. However, best interest decisions were not always recorded appropriately. We made a recommendation about this.

People and their relatives experienced a positive and inclusive approach to care and were encouraged to give their feedback to help improve the home. The staff worked with outside professionals to improve people's health and social wellbeing.

People told us they felt safe and secure and well cared for. People were safe because the registered manager had good systems for monitoring risk and staff had a good understanding of people's needs and how to keep them safe. People and relatives told us there was enough staff on duty to meet their needs and they did not need to wait when they called for support. People were supported to take their medicines safely.

The home was clean and the environment was kept safe. Some relatives felt parts of the home were tired looking but it was functional, and the care was 'fantastic'. Refurbishment works were underway to re-decorate the home.

People received care that was tailored to their needs and wishes. This was provided by caring, attentive and compassionate staff. The atmosphere of the home was positive, very welcoming, warm, and inclusive with friendly staff providing care and support in a way people liked and enjoyed. Positive interactions took place between people, staff and each-other throughout our visit. People had their privacy, dignity and confidentiality observed by staff, and they were encouraged and supported to be independent.

The registered manager ensured current legislation and best practice tools were used to provide care and support for people that was safe, effective, caring and responsive. There was a clear drive for continuous

improvement.

People were placed at the centre of the home and were genuinely involved in relation to all decisions about their care and the home.

Staff told us they worked well together as a team, and there was good morale amongst them.

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 and update

The last rating for this service was good (published 19 May 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?

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 ●

# Elton Hall Care Home

## 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 one inspector 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

Elton Hall 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 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 ten people who used the service and five relatives about their experience of the care

provided. We spoke with eight members of staff including the registered manager, senior care workers, care workers, activities coordinator and the chef.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

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

- People and their relatives told us they felt safe at the home. Comments from people and relatives included, "I feel the safest here than I have in any other care homes. I'm very safe here," "I'm safe here, staff are excellent," and "[Relative] is very safe here."
- Staff were clear on the potential signs of abuse and how to raise any concerns they might have.
- There were effective systems in place to safeguard people from abuse.

Assessing risk, safety monitoring and management

- Risks to people's welfare and safety were identified and well managed.
- The management of risk was proportionate, as it did not negatively impact on people's activities and personal freedom.

Using medicines safely

- People were provided with safe and appropriate support with their medicines, which were stored and managed safely.
- Staff completed training in how to administer medicines safely and had their competency assessed.
- An NHS best practice tool was used by the registered manager to track stock of medicines and ensure they were always available.

Staffing and recruitment

- Safe recruitment processes were followed for all staff to ensure they were suitable to work in the home.
- There were enough staff to support people and they were very attentive to people's needs. People told us, "There's always members of staff around," and "There's always enough staff to cover us."

Learning lessons when things go wrong

- A system was in place to monitor any incidents or accidents which occurred. This allowed for any patterns or trends to be identified so that action could be taken to prevent recurrence.

Preventing and controlling infection

- The home was clean throughout.
- We saw staff using appropriate Personal Protective Equipment (PPE) to reduce the risk of the spread of 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 has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed 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. 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.

- The registered manager had applied for DoLS authorisations when restrictions were in place to help keep people safe.
- We saw staff sought consent from people for any care offered. Staff had been trained and were knowledgeable on the MCA and DoLS and how they applied to some people living at the home.
- Best interest decisions had taken place, however we found these had not been recorded appropriately. It wasn't always clear what decisions had been made in the persons best interest.

We recommend the provider seek advice and guidance from a reputable source regarding best practice in relation to the Mental Capacity Act 2005.

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

- People were supported to maintain good health and had access to healthcare services when required. One person told us "They'd get the doctor on the phone in a second." Another person told us they were supported to see a dentist. They said 'I was in agony. The staff rang eight dentists to get me in that day.'
- Staff were aware of the importance of monitoring people's health and seeking guidance when they identified any concerns.
- People told us the staff were very good at supporting them to live healthier lives. One person told us they were supported to reduce their sugar intake due to oral health concerns, and another person told us there were health related supplies available at the homes tuck shop, including toothbrushes and toothpaste.

- The registered manager had identified staff 'champions' in specific areas, such as oral health, mental capacity and dementia. These champions ensured best practice in those areas was considered, and acted as extra support for other staff.

Staff support: induction, training, skills and experience

- Staff received a robust induction that included all mandatory training and extensive shadowing and observations of practice.
- People and their relatives told us staff were well trained and knew how to support them.

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

- People's needs were assessed in partnership with them. This fed into the support plans and risk assessments, which gave clear information about the support each person needed and preferred.
- People's health needs were regularly assessed and reviewed using nationally recognised tools. This included nutritional requirements and skin integrity to help keep people as healthy as possible.

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

- Rooms had been adapted to ensure people's needs could be supported.
- Equipment was in use to support people to move around the home independently.
- Parts of the home looked tired and in need of redecoration. One relative said "It looks a bit jaded but it's functional at the end of the day." The registered manager told us improvement works had already started and we saw these areas looked much improved. There was a plan in place to refurbish the whole home.

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

- People were complimentary about the food and told us they were offered a choice of food at meal times.
- People received sufficient food and drink that met their dietary needs and requirements. The kitchen staff had clear and robust systems in place to ensure people who had specific dietary needs were catered for.
- During a lunch time observation, we saw people who required additional support to eat their meals received this appropriately and in line with their care plan. Staff were observed to assist people patiently, and those people who required prompting to eat, did so in a dignified and attentive manner.

# 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 has 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

- People and their relatives told us they were well looked after. Comments included, "The staff are brilliant, they are kind," "They [staff] are so caring, they're all supportive, good hard-working staff," and "This is the best place."
- Staff showed concern for people and were keen to ensure people's rights were upheld and that they were not discriminated against in any way. People's right to privacy and confidentiality was respected.
- We observed people received support which was kind and caring. Staff had developed positive relationships with people and knew how to support them effectively. They spoke warmly about the people living at the home.

Respecting and promoting people's privacy, dignity and independence

- People told us staff were respectful and protected their dignity and privacy. One person said, "They always knock when they want to come in to my room."
- People's care plans recognised what people could do for themselves and what they needed help with. Staff promoted people's independence as much as possible.
- People looked at ease and comfortable in the presence of staff. Conversations we heard between people and staff were characterised by respect and warmth.

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

- People and their relatives were involved in the planning of their care. One person said, "Everything I do or change, I tell the staff and my care plan is updated."
- Regular care reviews were held with people and where appropriate their relatives. This ensured people's views were regularly considered.
- There were residents' meetings and people told us they were able to express their views.

# 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 has 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 and relatives spoke highly of the person-centred care provided at Elton Hall.
- People told us staff were knowledgeable of their needs.
- Care plans were written using knowledge gained from the pre-assessment and life histories. People's care plans provided in depth information on people and their needs and underpinned the excellent physical, emotional and spiritual care given by staff.
- All care plans were regularly reviewed to ensure people's changing needs were documented and information shared swiftly with staff, who would then adapt the support provided.

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's communication needs were identified, and information was provided in different formats if necessary to meet the Accessible Information Standard. Where people wore hearing aids and spectacles, staff ensured these were in place, clean and working.
- People used mainly speech, large print and some photos to communicate. People had a 'Communication' care plan. This described how the person communicated and how information might best be presented to them to aid their understanding.
- We saw information regarding health advice presented around the home in different formats. There was information about oral health displayed in large font and picture format.

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 in the home had developed positive relationships with other residents and staff. One person said, "I've made friends. I go to see [the person] who doesn't like coming out of her room. But she has started coming to my room. There's a good support network."
- Visitors were welcome to visit any time which supported people to maintain relationships. One relative told us, "Visitors are welcome. They know me by name and I get offered a cup of tea. There are no restrictions. I can even come for Sunday lunch."
- People told us they enjoyed living at the home and there was plenty to do. One person said "We've been to Stockton, Billingham, Darlington. We all take turns picking where we want to go. We do crafts and activities; play bowls with soft balls. There's plenty going on."

- People were supported to take part in activities that interested them. One person had run a tuck shop at a previous home. The person had enjoyed this so the registered manager arranged for them to run a tuck shop at Elton Hall. The person spoke with joy and pride at being responsible for this and helping others by providing goods in the shop.

#### Improving care quality in response to complaints or concerns

- A clear complaints process was displayed throughout the home. Complaints had been responded to appropriately.
- There was clear evidence the registered manager used feedback from people to develop the service.

#### End of life care and support

- End of life care plans were in place and showed consideration had been given to people's wishes.

## 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 has 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

- There was an extremely positive and open culture that ensured people were at the centre of everything the home did. People were empowered to be as independent as possible.
- Staff teams worked effectively together and were built around meeting the needs of people.
- People and relatives told us the service was "well run". One person said "I thank the manager and deputy once a month. I thank them for running this home the way it's run."

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

The registered manager actively encouraged feedback. This was done in a variety of ways, for example, through a variety of meetings, discussions and questionnaires. The registered manager also encouraged people and relatives to provide feedback on care home review sites. Feedback was generally positive, and it was clear the registered manager used this to improve the home.

- Relatives told us that staff were excellent at keeping them involved and involving them in their family member's care and support.
- There were regular staff meetings and staff told us they felt supported in their roles.
- When referrals to other services were needed, we saw that these referrals were made in a timely way

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

- The registered manager completed checks and audits which identified concerns and actions needed to improve.
- The registered manager was aware of their role and responsibilities, including what events they needed to notify CQC about. They had submitted notifications in line with legal requirements and displayed the rating of the last inspection.

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 met the regulatory requirements to be open and transparent with people using the service when things went wrong.