

Paramount Care (Gateshead) Limited

Paramount Care (Gateshead) Limited

Inspection report

Elliott House, Seaside Lane
Easington Colliery
Peterlee
County Durham
SR8 3PG

Tel: 01917318989

Date of inspection visit:
18 December 2018

Date of publication:
29 January 2019

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

Rating at last inspection: This was the first inspection for this service.

About the service: Paramount Care (Gateshead) Limited (Elliott House) is a care home that can accommodate up to 11 people who have additional learning needs and/ or mental health issues. The home provides people with opportunities to develop independence skills and coping strategies. On the day of our inspection there were five people using the service.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

Why we inspected: This was a planned inspection as part of our inspection programme.

People's experience of using this service: Everyone we spoke with told us Elliott House was a good place to reside and visit, that staff were kind and caring and that people were treated with respect. People said staff knew them very well and could anticipate their needs and that support was delivered in a timely way. People and their relatives described high levels of satisfaction with the service which impacted positively on their overall wellbeing.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People were involved in their day to day lives and were empowered to make their own choices about where they spent their time. Their independence was promoted and staff actively ensured people maintained links with their friends and family. Where appropriate, people were supported to make decisions about their preferences for end of life care.

The environment supported people to have time on their own and time with other people if they chose this. Cleanliness and health and safety were well managed. The environment was safe and people had access to appropriate equipment where needed.

Staff recruitment was safe. There was enough staff on duty at the right time to enable people to receive care in a timely way. Staff had appropriate skills and knowledge to deliver care and support in a person-centred way. Staff understood how to keep people safe and used information following accidents and incidents to reduce the likelihood of future harm.

People's health was well managed and staff had positive links with professionals which promoted their wellbeing. In addition, people had opportunity to access a range of activities including access to the local community.

People were observed to have good relationships with the staff team. The registered manager worked well to lead the staff team in their roles and ensure people received a good service. People, their relatives and staff all felt confident raising concerns and sharing ideas. All feedback was used to make continuous improvements to the service.

A full description of our findings can be found in the sections below.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as part of our re-inspection programme. If any concerning information is received 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.

Paramount Care (Gateshead) Limited

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.

Inspection team: The inspection was carried out by an adult social care inspector and an expert by experience. The expert by experience had personal experience of caring for someone who used this type of care service.

Service and service type: Paramount Care (Gateshead) Limited (Elliott House) is a care home. People in care homes receive accommodation and nursing or personal care. The Care Quality Commission (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 CQC. 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 48 hours' notice of the inspection visit because it is small and the people may often be out during the day and we needed to be sure that someone would be in. This inspection was completed on the 18 December 2018.

What we did:

Before the inspection: We reviewed information we had received about the service to plan the inspection. This included details about incidents the provider must notify us about, such as abuse; and we sought feedback from the local authority and professionals who work with the service. We assessed the information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection: We spoke with five people who used the service and three relatives. We spoke with the registered manager, deputy manager and four care staff. In addition, we spoke with two visiting health and social care professionals.

We reviewed a range of records. This included three people's care records and medication administration records (MARs). We looked at the personnel files for four members of staff. We reviewed staff training, recruitment and supervision records. We also looked at records related to the management of the service such as quality audits, surveys and policies. We observed how people were being cared for.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm.

People were safe and protected from avoidable harm. Legal requirements were met.

Staffing levels

- Staffing levels were appropriate and ensured people received responsive care and support.
- People and their relatives told us they received care in a timely way.

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

- 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.
- The registered manager demonstrated they were learning lessons from accidents and incidents. A member of staff told us, "We look at lessons learned and reflect on any areas we could have done better or differently which helps to shape and develop the service."
- The environment and equipment had been assessed for safety. There were plans in place to ensure people were supported in the event of an emergency.

Safeguarding systems and processes, including recruitment

- The provider had effective safeguarding systems in place and all staff spoken with had a good understanding of what to do to make sure people were protected from harm or abuse. Staff had been trained in how to protect vulnerable people and demonstrated a good awareness of safeguarding and whistleblowing procedures.
- People and their relatives told us they felt safe being supported by members of staff. People said, "I feel safe, it's lovely here" and "I am safe, there are no problems here." Relatives commented, "Up until now our son's care has been spot on, we can't fault this place" and "Our son has gained weight and is clean and happy since arriving at Elliot House. We trust the staff to keep him safe from harm."
- The provider operated a safer recruitment process and carried out relevant security and identification checks when they employed new staff to ensure they were suitable to work with vulnerable people.

Managing medicines safely

- Medicines were safely received, stored, administered and disposed of when no longer needed. People were encouraged to manage their own medicines where they had those skills.
- Staff were knowledgeable about people's medicines. Staff who administered medicines were trained and were required to undertake an annual competence assessment. Medicine audits were up to date.
- People told us they were happy with the support they received to take their medicines.

Preventing and controlling infection

- Staff followed good infection control practices and used personal protective equipment (PPE) to help prevent the spread of healthcare related infections.

- The environment was observed to be clean and everyone we spoke with felt the service smelt pleasant.

Is the service effective?

Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

People's outcomes were consistently good and people's feedback confirmed this.

Staff skills, knowledge and experience

- Staff were competent, knowledgeable and skilled, and carried out their roles effectively.
- Staff completed a comprehensive induction and had access to a wide range of training. They had opportunity for regular supervision and appraisal. Staff said, "The training at Elliot House is better and more thorough than training in other establishments in which I have previously worked", "I feel very valued and have been given many opportunities to develop and grow" and "Supervisions are very helpful."
- People told us staff knew what they were doing and met their needs.

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

- Assessments of people's needs were thorough and expected outcomes were identified. Care and support was reviewed regularly to understand progress and make changes where needed.
- Staff applied learning effectively in line with best practice, which led to good outcomes for people and supported a good quality of life. For example, staff used their knowledge of people's preferences to enhance their feelings of wellbeing and support to maintain relationships and hobbies.
- A relative told us, "[Name] can display challenging behaviour but staff are able to cope with it and keep me informed and involved with any incidents."

Supporting people to eat and drink enough with choice in a balanced diet

- People had choice and access to sufficient food and drink throughout the day; food was well presented and people told us they enjoyed it. Lunch was a sociable experience.
- People told us, "The food is nice", "The food is OK" and "Staff will make me food whenever I want some."
- Where people required their food to be prepared differently because of medical need or problems with swallowing this was catered for.
- Staff were knowledgeable about people's special dietary needs and preferences. The provider had a diet and nutrition policy in place and staff had completed training in food safety. The home had been awarded a "4 Good" Food Hygiene Rating by the Food Standards Agency on 19 September 2018.

Supporting people to live healthier lives, access healthcare services and support, working with other agencies to ensure consistent care for people

- Where people required support from healthcare professionals this was arranged and staff followed the guidance provided. Information was shared with other agencies if people needed to access other services such as hospitals.

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 with appropriate legal authority. 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- The registered manager followed all the principles and guidance related to MCA and Deprivation of Liberty Safeguards (DoLS) authorisations. They were working with staff to make sure all staff completed capacity assessments appropriately.
- Staff ensured that people were involved in decisions about their care and knew what they needed to do to make sure decisions were taken in people's best interests.

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

- People were involved in decisions about the premises and environment; for example, the colour of their room and support to make their room homely with their own belongings.
- The layout of the building provided adequate space for people with walking aids or wheelchairs to mobilise safely and the home was suitable for the people who used the service.
- People were free to access all areas of the service, including the garden which was secure and had accessible pathways for people to walk on.
- People and their relatives enjoyed the environment which had plenty of communal spaces where people could spend their time.

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect.

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- People we spoke with were happy with the care provided. Comments included: "Staff are lovely and friendly" and "They are good staff, they know my issues."
- Relatives told us they thought the staff were very kind. All relatives we spoke with confirmed that they could visit whenever they wanted and were always made to feel welcome. "Staff have been on courses regarding our son's condition and are better than we hoped for, they care about our son" and "Staff always listen to me."
- The registered manager told us how they supported people's human rights and promoted equality and diversity. They actively promoted people's rights and made sure staff treated people in a person-centred manner.
- Staff showed genuine concern for people's wellbeing. It was evident from discussions that all staff knew people very well, including their personal history, preferences, likes and dislikes. We found that staff worked in a variety of ways to ensure people received care and support that suited their needs.

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

- Staff supported people to make decisions about their care. They understood people's communication needs and this was documented in care plans. Staff supported people to make decisions about their care and knew how to recognise when people wanted help.
- We saw that information about advocacy services was available, and when needed, the staff enabled people to access these services. Advocates help to ensure that people's views and preferences are heard where they are unable to articulate and express their own views.

Respecting and promoting people's privacy, dignity and independence

- The staff explained how they maintained the privacy and dignity of the people they cared for. They told us that this was a fundamental part of their role. We saw that staff knocked on people's bedroom doors and waited to be invited in before opening the door.
- People we spoke with said their independence was promoted. For example, a kettle was purchased for one person so they could press a button to dispense water rather than having to hold the kettle which enabled them to make their own tea/coffee and another person was supported to be able to manage their own finances.
- We observed the staff team worked well together and with the people who used the service. Staff consistently engaged people in conversations and we heard lots of laughter throughout the visit. We found there was a calm relaxed atmosphere within the home.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs.

People's needs were met through good organisation and delivery.

Personalised care

- Staff knew people's likes, dislikes and preferences. They used this detail to care for people in the way they wanted.
- People and relatives told us care was delivered in the way they wanted and needed it.
- People were empowered to make choices and have as much control and independence as possible, including in developing care, support and treatment plans. Relatives were also involved where they chose to be and where people wanted that.
- People's needs were identified, including those related to protected equality characteristics, and their choices and preferences were regularly met and reviewed. For example, reasonable adjustments were made, where appropriate, and the service identified, recorded, shared and met the information and communication needs of people as required by the Accessible Information Standard.
- We observed that people were consistently asked to express their opinions about what was on offer and given choices about all aspects of their care and treatment.
- People had conflicting views about the activities programme at Elliott House. For example, people told us, "I get bored", "There's nothing much to do", "Staff take me out to get my hair and nails done", "I go and play pool in the pub" and "I regularly attend a nearby leisure complex."
- We saw one person watching television, another listening to music, another person was playing dominoes with staff and another person was playing a game with a member of staff before going Christmas shopping.
- Staff told us at a recent resident's meeting, people discussed the development of the activity room and what activities they may like to have accessible and how staff could support them to get involved.
- The registered manager told us they were recruiting an activities co-ordinator.

Improving care quality in response to complaints or concerns

- People knew how to provide feedback to the management team about their experiences of care and the service provided a range of accessible ways to do this.
- People and relatives knew how to make complaints should they need to. They told us they believed they would be listened to. The registered manager acted upon complaints in an open and transparent way. They used any complaints received as an opportunity to improve the service.

End of life care and support

- People were supported to make decisions about their preferences for end of life care, and staff empowered people and relatives in developing care and treatment plans. Professionals were involved as appropriate.
- Staff understood people's needs, were aware of good practice and guidance in end of life care, and respected people's religious beliefs and preferences.

Is the service well-led?

Our findings

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

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

Engaging and involving people using the service, the public and staff. Provider plans and promotes person centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- The service involved people and their relatives in day to day discussions about their care.
- People, relatives and staff had completed a survey of their views and the feedback had been used to continuously improve the service.
- Feedback from relatives and staff highlighted that the registered manager was extremely effective and operated a service that consistently strived to be excellent.
- The registered manager and the culture they created effectively supported the delivery of high-quality, person-centred care.
- Staff told us they felt listened to and that the registered manager was approachable. Staff told us, "I can confidently raise issues and concerns and have done on a number of occasions", "I really enjoy working at Elliott House and feel the morale is very good" and "I can approach my manager and deputy with any issue or need for support in all aspects of my role."
- Staff understood the provider's vision for the service and they told us they worked as a team to deliver high standards.
- The provider and registered manager positively encouraged feedback and acted on it to continuously improve the service.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements. Continuous learning and improving care

- The service was well-run. Staff at all levels understood their roles and responsibilities. The registered manager was accountable for their staff and understood the importance of their roles. The registered manager understood they must hold staff to account for their performance where required.
- The quality assurance system included lots of checks carried out by the registered manager and staff. The registered manager critically reviewed the findings from the various audits and used these tools to identify where improvements could be made. Following any change to practice the registered manager then reviewed these to determine if the alterations were having a positive impact for people who used the service.
- A culture of continuous learning meant staff objectives focused on driving improvement and providing a high standard of care.
- All appropriate reporting had been carried out to alert the CQC and local authorities when incidents occurred.

Working in partnership with others

- The service had good links with the local community and key organisations, reflecting the needs and preferences of people in its care.
- Visiting health and social care professionals told us staff were very professional and provided person-centred care. Staff had formed good relationships with people who used the service and demonstrated an in-depth knowledge and understanding of people's needs.