

Pathways Care Group Limited

Wallace Mews

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

We inspected Wallace Mews on 22 and 23 December 2015. This was an unannounced inspection which meant that the staff and provider did not know that we would be visiting.

Wallace Mews is a purpose built care home that provided care for up to 15 people with learning disabilities and people with a physical disability. The home is formed from two converted houses and operates over three floors.

The registered manager has been in post since 2013. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated regulations about how the service is run.

At the time of the inspection 14 people lived at the home and we met nine of the people who used the service. They told us that they were very happy with the service and found it met their needs.

We found that the registered manager and staff consistently ensured people were supported to lead an independent lifestyle. Staff readily identified triggers that would lead people to become distressed or that their mental health was deteriorating. We found this had a very positive impact on people and led to a marked reduction the number of occasions people were admitted to hospital.

Staff were aware of how to respect people's privacy and dignity. We saw that staff supported people to make choices and decisions.

We saw that detailed assessments were completed, which identified people's health and support needs as well as any risks to people who used the service and others. These assessments were used to create plans to reduce the risks identified as well as support plans.

We saw that people were offered plenty to eat and assisted to select healthy food and drinks which helped to ensure that their nutritional needs were met. We saw that each individual's preference was catered for and people were supported to manage their weight.

We saw there were systems and processes in place to protect people from the risk of harm. We found that staff understood and appropriately used safeguarding procedures.

People were supported to maintain good health and had access to healthcare professionals and services. People were supported and encouraged to have regular health checks and were accompanied by staff to hospital appointments. We saw that people had hospital passports. The aim of a hospital passport is to assist people with a learning disability to provide hospital staff with important information they need to know about them and their health when they are admitted to hospital.

Staff had received a range of training, which covered mandatory courses such as fire safety, infection control and first aid as well as condition specific training such as working with people who have learning disabilities. Staff had also received training around the application of the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards. The staff we spoke with fully understood the requirements of this Act and were ensuring that where appropriate this legislation was used.

Staff shared with us a range of information about how they as a team worked very closely with people to make sure the service enabled each person to reach their potential.

People and the staff we spoke with told us that there were enough staff on duty. We found there were sufficient staff on duty to meet people's needs.

Effective recruitment and selection procedures were in place and we saw that appropriate checks had been undertaken before staff began work. The checks included obtaining references from previous employers to show staff employed were safe to work with vulnerable people.

We reviewed the systems for the management of medicines and found that people received their medicines safely.

We saw that the registered manager had an effective system in place for dealing with people's concerns and complaints. We found that people felt confident that staff would respond and take action to support them.

We found that the building was very clean and well-maintained. Appropriate checks of the building and maintenance systems were undertaken to ensure health and safety, relevant infection control procedures were followed by the staff at the home. We found that action was taken to minimise known risks.

The registered manager had developed a range of systems to monitor and improve the quality of the service provided. We saw that the registered manager had implemented these and used them to critically review the service.

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.

There were sufficient skilled and experienced staff on duty to meet people's needs. Robust recruitment procedures were in place. Appropriate checks were undertaken before staff started work.

Staff could recognise signs of potential abuse. Staff reported any concerns regarding the safety of people to the registered manager.

Appropriate systems were in place for the management and administration of medicines.

Appropriate checks of the building and maintenance systems were undertaken, which ensured people's health and safety was protected.

Is the service effective?

Good ●

The service was effective.

Staff had the knowledge and skills to support people who used the service. They were able to update their skills through regular training.

Staff understood the requirements of the Mental Capacity Act 2005.

People were provided with a choice of nutritious food.

People were supported to maintain good health and had access to healthcare professionals and services.

Is the service caring?

Good ●

This service was caring.

Staff were extremely supportive and tailored the way they worked to meet each person's needs.

We saw that the staff were empathic and effectively supported people to deal with all aspects of their daily lives.

People were treated with respect and their independence, privacy and dignity were promoted. Staff actively supported people to make decisions about their care.

Is the service responsive?

Good ●

The service was responsive.

People's needs were assessed and care plans were produced identifying how the support needed was to be provided. These plans were tailored to meet each individual's requirements and reviewed on a regular basis.

People were involved in a wide range of everyday activities and led very active lives.

The complaints procedure was accessible. We found that relatives were regularly contacted to check if they were happy with the service.

Is the service well-led?

Good ●

The service was well led.

The service was well-led and the operational manager and registered manager were extremely effective at ensuring staff delivered services of a high standard.

We found that the registered manager was very conscientious and critically reviewed all aspects of the service then took timely action to make any necessary changes.

Staff told us they found the registered manager to be very supportive and felt able to have open and transparent discussions with them through one-to-one meetings and staff meetings.

There were very effective systems in place to monitor and improve the quality of the service provided. Staff and the people we spoke with told us that the home had an open, inclusive and positive culture.

Wallace Mews

Detailed findings

Background to this 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.

An adult social care inspector completed this unannounced inspection of Wallace Mews on 22 and 23 December 2015.

The provider was not asked to complete a provider information return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

Before the inspection we reviewed all the information we held about the home. The information included reports from local authority contract monitoring visits.

During the inspection we met with nine people who used the service and one of their visitors. We also spoke with the registered manager, a deputy manager, four support workers and the cook.

We spent time with people in the communal areas and observed how staff interacted and supported individuals. We also looked around the home. We observed the meal time experience and how staff engaged with people during activities. We looked at three people's care records, three staff records and the training records, as well as records relating to the management of the service.

Is the service safe?

Our findings

People told us that they were happy and liked the staff and they thought the home met their needs.

People said "It is great here." And, "I like it here." And, "I have never looked back since I moved here. The staff are great and make sure I am fine."

We found that staff were dedicated to ensuring that the home provided a safe environment and would raise matters if they felt there were concerns. We found that relatives were routinely consulted by the staff and they felt the home was safe and supportive environment.

Staff told us that they regularly received safeguarding training. We saw all the staff had completed safeguarding training this year. The staff we spoke with were aware of the different types of abuse, what would constitute poor practice and what actions needed to be taken to report any suspicions that may occur. We saw that abuse and safeguarding was discussed with staff on a regular basis during supervision and staff meetings.

Staff told us that they felt confident in whistleblowing (telling someone) if they had any worries. The home had up to date safeguarding and whistleblowing policies in place that were reviewed on a bi-annual basis. We saw that these policies clearly detailed the information and action staff should take, which was in line with expectations. We found that if they felt matters were not being looked into in a timely manner staff we spoke with told us that they would not hesitate to raise them with the provider and external parties.

We saw that staff had received a range of training designed to equip them with the skills to deal with all types of incidents including medical emergencies. Staff could clearly talk about what they needed to do in the event of a fire or medical emergency. The staff we spoke with during the inspection confirmed that the training they had received provided them with the necessary skills and knowledge to deal with emergencies. We found that staff had the knowledge and skills to deal with all foreseeable emergencies.

We confirmed that checks of the building, fire alarms and equipment were carried out to ensure people's health and safety was protected. We saw documentation and certificates to show that relevant checks had been carried out on the gas boiler, fire extinguishers and portable appliance testing (PAT), which is a check that items such as televisions are safe. This showed that the registered provider had taken appropriate steps to protect people who used the service against the risks of unsafe or unsuitable premises.

We reviewed people's care records and saw that staff had assessed risks to each person's safety and records of these assessments had been regularly reviewed. Risk assessments had been personalised to each individual and covered areas such as using the kitchen, eating and bathing. This ensured staff had all the guidance they needed to help people to remain safe.

We found that the registered provider operated a safe and effective recruitment system. The staff recruitment process included completion of an application form, a formal interview, previous employer

reference and a Disclosure and Barring Service check (DBS), which checks if people have been convicted of an offence or barred from working with vulnerable adults. These checks were carried out before staff started work at the home.

Through our observations and discussions with staff members, we found there were enough staff with the right experience and training to meet the needs of the people who used the service. The records we reviewed such as the rotas and training files confirmed this was the case. We saw that a senior support worker and four to five staff were on duty during the day and two waking staff members were on duty overnight. The registered manager worked during the week as an additional supernumerary staff member.

Staff obtained the medicines for the people who used the service. Each person's medicines were kept securely. Adequate stocks of medicines were securely maintained to allow continuity of treatment. We checked the medicine administration records (MAR) together with receipt records and these showed us that people received their medicines correctly.

All staff had been trained and were responsible for the administration of medicines to people who used the service. We found that staff were readily able to discuss people's medicines and found that people got their medicines when they needed them.

We saw that there was a system of regular audit checks of medication administration records and regular checks of stock. This meant that there was a system in place to promptly identify medication errors and ensure that people received their medicines as prescribed.

Is the service effective?

Our findings

People told us that the staff understood them and knew how to effectively support them. They told us that staff had a very good knowledge of how to support people with mental health needs and because of the staff support they had remained well.

People said, "The staff are excellent." And, "This is a brilliant home."

We found that the staff had a good understanding of the Mental Capacity Act 2005 (MCA) and what actions they would need to take to ensure the home adhered to the code of practice. The Mental Capacity Act 2005 (MCA) balances an individual's right to make decisions for themselves with their right to be protected from harm if they lack mental capacity to make decisions to protect themselves. It provides a statutory framework for people who lack mental capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they may lack capacity in the future. It sets out who can take decisions, in which situations, and how they should go about this. The Act generally applies to people who are aged 16 or older, and 18+ for Advance decisions, lasting powers of attorney and the deprivation of liberty safeguards.

The care records we reviewed contained appropriate assessments of the person's capacity to make decisions. We found these assessments were only completed when evidence suggested a person might lack capacity, which is in line with the MCA code of practice. Care records also described the efforts that had been made to establish the least restrictive option for people was followed and the ways in which the staff sought to communicate choices to people, for instance via people going with the staff or pointing to what they wanted.

When people had been assessed as being unable to make complex decisions there were records to confirm that discussions had taken place with the person's family, external health and social work professionals and senior members of staff. This showed any decisions made on the person's behalf were done after consideration of what would be in their best interests. Best interest decisions were clearly recorded in relation to care and support, finance, administering medicines and going out amongst others.

At the time of the inspection all of the people were subject to a Deprivation of Liberty Safeguards (DoLS) order. DoLS is part of the MCA and aims to ensure people in care homes and hospitals are looked after in a way that does not inappropriately restrict their freedom unless it is in their best interests. Staff we spoke with had a good understanding of DoLS and why they needed to seek these authorisations. They also kept a record of when the DoLS expired and were aware they may need to do further assessments and re-apply for another authorisation. The registered manager was aware of the person's right to contest the DoLS and apply to the Court of Protection for a review of this order.

Staff told us that all of the people who lived at the home had complex needs and communicated in different ways so learning how to support them effectively was essential. We observed the way staff interacted with people and saw they were attentive and appeared to understand individual's communication needs. We

saw staff constantly monitored people to ensure their needs were being met. Staff engaged with people in a friendly and supportive manner. From our discussions with staff we found that they had a very good understanding of each person care and support needs.

We saw records to confirm staff encouraged people to have regular health checks and, where appropriate, staff accompanied people to appointments. We saw that people had hospital passports. The aim of a hospital passport is to assist people with a learning disability to provide hospital staff with important information they need to know about them and their health when they are admitted to hospital.

We saw that where people had conditions that needed regular review, staff ensured this happened and that everyone went for annual health checks. When concerns arose staff contacted the relevant healthcare professionals. For instance, staff were in regular contact with people's community liaison nurses and when needed had asked these professionals to organise reviews with consultants.

We found that staff knew what people preferred to eat and ensured each individual had meals that they enjoyed but were also varied. We heard that all of the staff were good at cooking and took pride in making healthy meals that people enjoyed.

From our review of the care records we saw that nutritional screening had been completed for people who used the service. We found that the people were all within healthy ranges for their weight and no one was malnourished or overweight.

Staff told us their training was up to date and the records confirmed that staff had a wide range of both mandatory and role specific training. We were told staff were required to undertake annual refresher training on topics considered mandatory by the service. This included: safeguarding vulnerable adults, fire, health and safety, nutrition, infection control, first aid, medicines administration, and use of de-escalation interventions. We found staff were aware of their responsibilities and had the skills, knowledge and experience to support the people.

We confirmed from our review of staff records and discussions that the staff were suitably qualified and experienced to fulfil the requirements of their posts. Staff told us that they completed mandatory training and condition specific training such as working with people who displayed behaviours which may challenge. The records we reviewed show that the staff training was up to date. This included: fire, nutrition, infection control, first aid, and food hygiene. We also found that the provider completed regular refresher training for a wide range of courses such as health and safety, safeguarding vulnerable adults, physical interventions, and various conditions such as epilepsy and diabetes.

We saw that staff who had recently commenced work at the home had completed an in-depth induction programme when they were recruited. This had included reviewing the service's policies and procedures and shadowing more experienced staff. We found these staff only started to work on a one-to-one basis with people when both were confident the staff member knew how to effectively support the individual.

We found that new staff, where appropriate were completing the Care Certificate induction. The Care Certificate sets out learning outcomes, competences and standards of care that are expected. One of the senior support workers we met had recently started work at the home and told us about their induction, which had included refresher mandatory training and shadowing the other senior support workers.

Staff we spoke with during the inspection told us the registered manager was very supportive. We found that the registered manager had ensured that the staff completed supervision sessions and had an annual

appraisal. Supervision is a process, usually a meeting, by which an organisation provide guidance and support to staff. We saw records for the recent months showed that staff had received an appraisal and at least three supervision sessions. Also a plan was in place to ensure staff regularly received supervision throughout 2016.

Is the service caring?

Our findings

The registered manager and staff that we spoke with showed genuine concern for people's wellbeing. They were ensuring people led very active and engaging lives and that all the support was person-centred.

We found staff made sure the care and support was tailored to each individual's preferences. It was evident from discussion that all staff knew people very well, including their personal history preferences, likes and dislikes and had used this knowledge to form very strong therapeutic relationships. We found staff worked in a variety of ways to ensure people received care and support that suited their needs.

We found staff embraced person-centred care principles and used these in every aspect of the support they undertook. We saw they had used these skills to find positive ways to support people reduce their distress such as going swimming and to discos.

We found staff were now equipped with the skills they needed to offer truly person-centred care. Throughout our visit we observed staff and people who used the service engaged in a range of activities both inside and outside the home. We found people now went out on a daily basis.

We also found the registered manager had critically reviewed the needs of people and whether they were being met at the home.

We found staff at the service were very welcoming. The atmosphere was relaxed and friendly. Staff demonstrated a kind and caring approach with all of the people they supported. We saw staff actively sought confirmation from people that they were happy with what was happening and took time to help people feel valued and important. We saw that staff understood the needs of the people and knew when they needed assistance or were getting frustrated.

We found that the staff could readily understand all the communication methods people used. Staff were able to tell us how people expressed their views via facial expressions and made their needs known. We observed that staff picked up on very small changes in people's behaviours. Staff had developed a range of ways in which they sought people's views. Staff could clearly detail how this person expressed their agreement to plans and what would indicate that they were enjoying an activity.

We found care records were very detailed and informative. The support plans and assessments clearly outlined each person's needs and were completely person-centred. We found staff worked in a variety of ways to ensure people received support they needed. For instance one person had limited upper body movement and staff had found they could despite these limitations use iPads and computer technology so provided access to this media.

Is the service responsive?

Our findings

We found the registered manager was a strong advocate for people and critically reviewed the service to make sure staff followed best practice guidelines. They were committed to empowering people who used the service to live fulfilling lives and reach their potential. The registered manager shared with us the commendation for the staff's caring attitude they had received from the local mayor. The feedback from relatives we spoke with and the written feedback forms reviewed showed they thought the care was exceptional.

We found the care records were comprehensive and well-written. They clearly detailed each person's needs and were very informative. We saw as people's needs changed their assessments were updated as were the support plans and risk assessments. During the inspection we spoke with staff who were extremely knowledgeable about the support that people received. They could readily outline what support plans were in place and the goals of each plan. The people we spoke with told us they found that the staff made sure the home worked to meet their individual needs and to reach their goals.

The people who used the service needed support to manage their emotional responses to everyday activities and stress. We saw staff were very effective at supporting people to manage their impulse control and emotions. We saw staff intervened and deescalated situations as people became anxious and before it caused a major issue for the person.

We saw staff had given consideration to the impact people's learning disabilities had upon their ability to understand events and engage in every-day activities. We observed that staff used this information to provide meaningful occupation for people and to organise outings and visits that people would enjoy. We saw that people were engaged in activities, which they appeared to enjoy. We found that due to staff support people who used the service had been able to attend local art groups and won awards for their work. One person had, in an open contest, won a place in a national inventor's competition and had their design turned into a prototype for display at this contest.

During the inspection we spoke with staff who were extremely knowledgeable about the care and support that people received. We found that the staff made sure the home worked to meet the individual needs and goals of each person. Staff told us that people were now involved in a wide range activities and outings, which we confirmed from our observations and care records. We observed people enjoying looking at books, going out in the garden and to local shops.

We heard how people were being assisted to lead fulfilling lives. Staff told us about all of the activities people enjoyed and we heard that people went out and about every day as well as on holiday this year. Also people routinely went to restaurants, cinemas, shopping and the theatre. We heard how the registered manager had reviewed the service and identified what activities people would enjoy then supported staff to ensure these happened.

We found that the staff and in particular one staff member had researched all of the activities in the area and

ensured people could access and multitude of stimulating activities. Within the home we found that an extensive programme of activity was on hand and each day people were given opportunities to learn new skills and develop their existing ones. When we visited people were enjoying baking, which involved not only cooking but researching the cooking methods. We saw people produced work books on the methods and looked at how to enhance skills such as sugar craft and cake making. People we found were extremely engaged in the activity and were extremely eager to tell us how much they enjoyed these and the other activities such as art and craft they completed at the home.

The registered provider had developed an accessible complaints procedure, which was on display. We also found that relatives were provided with a copy of the complaints procedure. Staff told us that they were very comfortable being advocates for people. We found the registered manager and staff were always open to suggestions, would actively listen to them and resolved concerns to their satisfaction.

We looked at the complaint procedure and saw it clearly informed people how and who to make a complaint to and gave people timescales for action. We saw that there no complaints had been made in the last 12 months. The registered manager discussed with us the process they would use for investigating complaints and we found that they had a thorough understanding of the complaints procedure.

Is the service well-led?

Our findings

We found people were routinely consulted and found they spoke very highly of the service, the staff and the registered manager. They thought the home was well run and completely met their needs. They found staff recognised any changes to their needs and took action straight away to look at what could be done differently.

Staff told us, "I love working here." And, "The manager and operational manager have really helped us to improve the home and I now feel that we are giving people the best care possible". And, "We as a team really can take pride in the improvements we have made."

We saw that the staff team were very reflective and all looked at how they could tailor their practice to ensure that the care delivered was completely person centred. We found the registered manager was the integral force ensuring the home was safe, responsive, caring and effective. We found that under their leadership the home had developed and been able to support people with complex needs lead ordinary lives.

The staff we spoke with described how the registered manager constantly looked to improve the service. They discussed how they as a team discussed what went well and what did not and used this to make positive changes. For instance, staff told us that recently they had been looking at how they adhered to the requirements of the MCA and this had led them to reviewing all of the records to ensure these clearly detailed people's strengths and the 'best interest' decisions being made. Staff told us that the registered manager was very supportive and accessible. They said they were a great support and very fair. Staff told us they felt comfortable raising concerns with the registered manager and found them to be responsive in dealing with any concerns raised. Staff told us there was good communication within the team and they worked well together.

The home had a clear management structure in place led by an effective registered manager who understood the aims of the service. They ensured staff kept up to date with the latest developments in the field and implemented them, when appropriate, into the services provided.

We found that the registered manager clearly understood the principles of good quality assurance and used these principles to critically review the service. We found that the registered provider had effective systems in place for monitoring the service, which the registered manager fully implemented. They, alongside the operational manager, completed monthly audits of all aspects of the service, such as infection control, medication and learning and development for staff. They took these audits seriously and used them to critically review the home. We found the audits routinely identified areas they could improve upon. We found that the registered manager produced action plans, which clearly detailed what needed to be done and when action had been taken. We found that strong governance arrangements were in place and these ensured the home was well-run.

Staff told us the morale was excellent and that they were kept informed about matters that affected the

service. They told us that team meetings took place regularly and that they were encouraged to share their views. They found that suggestions were warmly welcomed and used to assist them constantly review and improve the service. We found that this critical thinking meant the home was extremely person-centred and staff told us that they were always asked to consider how they could make the service very person-specific.