

Percy House Limited

Percy House

Inspection report






50-52 Beaconsfield Street
Blyth
Northumberland
NE24 2DS

Tel: 01670354815
Website: www.percyhouseblyth.com

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Ratings

Overall rating for this service	Outstanding 
Is the service safe?	Good 
Is the service effective?	Good 
Is the service caring?	Outstanding 
Is the service responsive?	Outstanding 
Is the service well-led?	Good 

Summary of findings

Overall summary

About the service

Percy House provides accommodation and personal care for up to 18 people who have mental health needs. At the time of the inspection there were 18 people living at the home. The provider also operates an outreach support service from the same premises which is not regulated by CQC.

The home has been adapted from terraced houses in a residential area.

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

People said the service was extremely caring. The service was run by a family and people said the providers made them feel valued and cherished like part of their family. People said the service had an immense impact on their ability to rebuild relationships with their own family and friends.

Health and social care professionals told us staff were exceptionally kind, caring and compassionate. The service was exemplary at helping people achieve positive outcomes, building confidence and independence to better manage their mental health.

People and care professionals said their mental, emotional and physical well-being had significantly benefited by living at the home. Several people had previously used long-stay hospitals but at Percy House they could live successful lives as citizens of their local community.

The provider created a caring, accepting environment where people's well-being and individuality was at the heart of the service. The provider was creative and innovative at looking for ways to meet individual needs.

People had capacity to make all their own decisions. This was respected by the provider and staff.

People were supported to have maximum choice and control of their lives and staff assisted them in the least restrictive way possible and in their best interests; the policies and systems in the service upheld this practice.

Staff were well trained and well supported. The provider was very supportive of people and constantly considered how they could enhance the service.

People and staff praised the culture of the management and staff team. They were all committed to providing high quality, person-centred support for people to be able to live positive lifestyles.

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 this service was good (published 15 June 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 exceptionally caring.

Details are in our caring findings below.

Outstanding 

Is the service responsive?

The service was exceptionally responsive.

Details are in our responsive findings below.

Outstanding 

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good 

Percy House

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

Percy House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 other care 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 five people who used the service about their experience of the care provided. We spoke with the deputy manager, two support staff, the registered manager and the nominated individual. The

nominated individual is responsible for supervising the management of the service on behalf of the provider. We have referred to the registered manager and nominated individual as 'the managers' in this report.

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

After the inspection

We continued to seek clarification from the provider to validate evidence found. We received feedback from seven care professional involved with people who used the service.

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

- Systems were in place to minimise the risk of abuse. People said they felt "very safe" at the home.
- People said they knew how to raise any concerns and the provider regularly asked them about this. Staff had completed safeguarding training and knew the steps to follow for reporting any concerns.
- There had been no safeguarding issues over the past year.

Assessing risk, safety monitoring and management

- People were protected from avoidable harm. They had been involved in agreeing their own individual risk assessments. These showed how risks to a person's safety could be reduced.
- People and staff took part in regular fire drills. The provider checked how they responded to see if they would require additional support in an emergency.
- The provider had a comprehensive maintenance programme in place to make sure the premises were safe for people and staff. A detailed 'in case of emergency' file outlined the steps for staff to take to respond emergencies and sudden events.

Staffing and recruitment

- There were sufficient staff to support people.
- People said staff assisted them whenever they needed. One person had a pendant to alert staff if they fell. They said, "If I press this they all come running! It makes me feel safe."
- Overall, safe recruitment processes were in place to make sure new staff were suitable to work in the care home. These could be strengthened by recording interviews and any verbal references.

Using medicines safely

- People were supported with their medicines in a safe way.
- People were involved in assessments about their medicines and whether they needed assistance. Some people managed elements of their own medicines. The medicines system meant people could take specific amounts of their medicines with them if they were staying away from the home.
- Staff were trained to support people with their medicines and their competency was regularly checked.

Preventing and controlling infection

- The home was clean and free from odours.
- Staff used appropriate equipment to keep the home hygienically clean.

Learning lessons when things go wrong

- The provider monitored accidents and incidents to see if improvements could be made to keep people safe.

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.

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

- People's needs were assessed before they came to the service to make sure the right care could be provided.
- Information about people's need and abilities was used to develop individual plans of care.
- Health care professionals said the service used good models of care to support the recovery of people's mental health and well-being.

Staff support: induction, training, skills and experience

- Staff had training and support that was relevant to their role. They commented, "We have lots of training" and "We have appropriate training in mental health – it supports us to understand how service users feel".
- Staff described managers as "supportive". Senior managers carried out individual supervisions and appraisals with each staff member.
- The provider was mindful of staffs' well-being and offered them support and signposts to other resources.

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

- People were encouraged to maintain good nutritional health. Some people's mental health had affected their relationship with food. The service kept their weight and well-being under review so any changes in health could be identified.
- People were fully involved in menu suggestions and made positive comments about the meals. These included, "I'm very picky but they make me what I like" and "The food is very good. (Staff) is a good cook".
- There were set times for meals and drinks. The provider explained this encouraged people to join others in the dining room, but it was still their choice whether to do so. Some people had facilities in their own room so they could have drinks and snacks whenever they wanted.

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

- The service continued to be effective in supporting people's health and wellbeing. The provider employed an independent health consultancy to carry out annual health checks for all the people in addition to their annual GP reviews.
- People were supported to maintain contact with a range of general and mental health practitioners.
- All the care professionals contacted were very positive about the effectiveness of the service provided at Percy House. Their comments included, "They are all dedicated to the people that they look after within a recovery focus model" and "(The service) manages their mental health issues in the community really well

and lets us know when they are concerned".

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

- The home was extended terraced houses. It had been adapted, where space allowed, to provide en-suites to bedrooms. It was not designed to provide accommodation for people with physical disabilities.
- The home did not provide a passenger lift or assisted bathing. People with mobility needs were accommodated in ground floor bedrooms with en-suite wet rooms. The provider said they would review individual people's needs if anyone else developed mobility issues.

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.

- All of the people who lived there had capacity. Staff were clear people could make their own decisions.

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 outstanding. At this inspection this key question has remained the same. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- The managers and staff continued to create an incredibly caring and supportive atmosphere in the home. People said they were exceptionally well treated and valued.
- People said they felt part of the provider's family because they who had run the home for many years. They commented, "It's run by a family and I feel part of the family", "It's a wonderful place" and "They are like friends".
- A care professional involved with several people at the service said people told them they "loved" the staff team, see the staff as their family and seem genuinely happy there.
- Staff had worked tirelessly with several people to help them re-establish relationships with family members that had previously broken down. The service had supported people to find ways of communicating with their family either through iPads or visits.
- Care professionals said the service was "truly caring". Their comments included, "I feel the staff team go above and beyond their caring role to provide such a homely and fantastic service", "They have the residents' best interest at everything that they do" and "Without a doubt they enhance the lives of their service users with their friendly, approachable staff".

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

- People were strongly encouraged to make their own choices and verbalise their thoughts and feelings about these. Managers and staff had built very trusting relationships with people to give them the confidence to make decisions and say what they wanted.
- People said they were fully involved in making decisions about their own care and support. Each person met with their keyworker monthly to review their own support plans. One person commented, "Staff involve me. They ask how I am or if there's anything I need."
- The provider valued people's contribution to decision-making in the home. People told us they were encouraged to take part in the recruitment decisions about new staff. The provider commented, "When it comes to making staff appointments, they [people] should have the deciding vote because they live here."
- The provider arranged for independent advocates to support people with any significant decisions where the person needed impartial support to do so.

Respecting and promoting people's privacy, dignity and independence

- The service had a remarkable impact on people's dignity. For example, the service had supported people with low self-esteem to take pride in their personal appearance and this had significantly improved their confidence and reduced their anxieties.

- The managers and staff spoke about each person's skills and abilities in very positive and uplifting ways. The care records were written in a respectful, valuing way which celebrated people's individuality.
- People's level of independence had significantly improved at Percy House. For example, whilst living in another setting one person had previously had their insulin administered by nurses. Since coming to the home the person now administered it independently.
- A care manager said, "People are treated with decency and respect and also with compassion." Another care professional commented, "Clients have fed back to me Percy House support is hugely beneficial to them and maximises their independence."

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 now improved to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received an exceptionally personalised service that supported their very individual needs. The service was distinctive in its success of assisting people with complex mental health difficulties to maximise their independence. People who had previously been unable to cope in community settings had been supported to achieve positive outcomes in their lives.
- The managers and staff had superb relationships with individual people and were mindful of each person's feelings and emotional support needs. Care professionals commented, "[Staff] have built up a fantastic rapport and know how to react with each client as an individual" and "The staff are very knowledgeable about each resident which shines through".
- Staff fully embraced people's diversity and helped them to lead the very individual lives they wanted. They supported people quietly and discreetly with their personal lifestyles.
- The service had very detailed care plans outlining what worked well or not for each person. People were fully involved in their own care planning.
- The service was extremely adaptable and flexible to meet any changes in people's needs. Staff were able to spot even slight changes in their well-being. For example, if one person didn't shave each day it meant their mental health had dipped so staff could be on hand to monitor them.
- Care professionals highly praised the responsiveness of the service. They commented, "Staff are quick at picking up any changes in my clients' mental health and get the support they need before it hits crisis point, and they understand how detrimental this would be to each resident."

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

- The service had been remarkable in supporting people to regain social skills and get them engaged in a range of activities. For many people the home was their first successful place to live in the community. They could go out independently every day and use local facilities like shops and cafes.
- The service had helped people broaden their experiences of the UK. Some people had previously lived in long-term institutions so had never had the chance to go outside of the area. The provider and staff arranged frequent trips away such as York and Blackpool and encouraged people to make suggestions about where they would like to go.
- The provider arranged other meaningful activities for people. They had started their own football club for people who lived at the home and who used the outreach service. They had their own strip and were in a league with other local services. Although none of the residents was currently on the team, they came along to watch the games. The service arranged weekly sessions at a local snooker club and held computer

classes in the home for people who wanted to learn IT skills.

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 individual communication styles were fully respected and understood. One person struggled to form sentences and staff knew to use short sentences and limited choices to help them make sense of their conversation.
- There was a range of information in pictures, photographs and writing to inform people about what was happening in the home. These included staff rotas, menus and forthcoming trips out so people were kept fully informed about events.

Improving care quality in response to complaints or concerns

- The provider welcomed comments about the service and encouraged people to do this. People said they had "excellent" relationships with the managers. There was clear information around the home about how to make a complaint as well as a comment box where people could raise issues anonymously if they preferred.
- People said they would be very comfortable about raising any issues. They commented, "If there was anything wrong I'd tell (nominated individual) - I feel I can tell him anything" and "If I had any problems I can see (registered manager and nominated individual) anytime or the staff".
- There had been no complaints made about the service in the past year.

End of life care and support

- The service provided a 'home for life' for people. Staff had provided compassionate care for people during their last stages with support from McMillan and community nurses.
- The nominated individual had sensitively arranged information for people about different choices for funeral arrangements. They had also helped people find advocacy services for those who wanted to arrange wills and advanced directives. This had really helped people to make considered decisions about what they wanted and their preferred care.
- Staff had provided comforting support, holding the hand of a person who had asked them to stay whilst they sat with their spouse who was dying. Staff had helped some people through the death of loved ones, going with them to funerals if they wanted, and quietly helping them through their grief.
- The provider recognised the importance of good end of life care and arranged group training for staff to help them manage those times with sensitivity and resilience.

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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The service had a positive, inclusive culture. People said the managers and staff were helpful and approachable.
- The service had been run for many years by one family. Two of those family members were the nominated individual and registered manager respectively. They had grown up in the home and the service was part of their lives and not just a job.
- People said they could speak openly with any of the staff including management. They were encouraged at residents' meetings to make suggestions about their service. People who chose not to attend the meetings were offered a one-to-one chat with the managers to talk about any suggestions and their views.
- People were encouraged to complete surveys to give their views in a considered way. The results of the surveys showed people felt they received a high-quality service.

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

- Systems were in place to monitor the quality and safety of the service. This included regular audits and checks by the managers.
- The managers understood the regulatory requirements of operating a registered care service. They were aware of their responsibility to be open and transparent if anything went wrong.

Continuous learning and improving care

- The managers were committed to continuous improvements at the service for the benefit of people who lived there.
- A number of new initiatives were being put into place including electronic care planning. This meant staff could use electronic tablets to update records in real time, and to review them with each person in a discreet way rather than a bulky paper file.
- The managers were very receptive to areas for improvement. During this inspection, following discussions about access at the front door, the provider arranged for a biometric door lock to be fitted. This would only allow access to people living at the home and would use their fingerprints as a key.
- The service had recently won a silver award in Better Health at Work. This showed the provider's commitment to making sure Percy House was a positive environment to work in.

Working in partnership with others

- The provider and registered manager worked very closely with a range of health and social care professionals who were involved in people's care.
- Care professionals said there was very good communication from the service. Their comments included, "The managers are fantastic at keeping me in the loop and bringing things to my attention" and "I have enjoyed a very effective working relationship with them".