

Pathways Care Group Limited

# Wallace Mews

## Inspection report

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Date of inspection visit:  
23 January 2024

Date of publication:  
15 February 2024

### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Wallace Mews is a residential care home providing accommodation and personal care to up to 15 people. The service provides support to people living with a learning and / or physical disability. At the time of our inspection there were 15 people using the service.

### People's experience of the service and what we found:

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessment and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### Right Support

People were supported in a way that respected them as individuals and their personal and cultural choices. Staff had a good understanding of people's needs and care records contained good detail to support staff in appropriately helping people. There was a friendly and homely atmosphere at the service and people and staff enjoyed each other's company. One relative told us, "It's all lovely. I wouldn't have them anywhere else. It's perfect."

### Right Care

People received high quality care from staff who had completed a range of training and were well supported by management. Care records contained information about risks related to support and how staff should deal with or mitigate these risks. Doors in some areas were left unlocked posing a potential hazard. The registered manager addressed this issue. People looked happy and relaxed in the company of staff and had a good relationship with them. Staff looked to ensure people lived the best life they could.

### Right Culture

There was a strong culture of delivering high quality care. All staff were committed to ensuring people had the same opportunities and access to services as the wider public. There was strong and effective leadership at the home, which proactively advocated for people. Family members and professionals all praised the service and said people's lives had been enhanced from living at the home.

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.

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

The last rating for this service was Good (Published 30 July 2018)

#### Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook a focused inspection to review the key questions of safe and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'All inspection reports and timeline' link for Wallace Mews on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow Up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

# The five questions we ask about services and what we found

We always ask the following five questions of services.

<p><b>Is the service safe?</b></p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p><b>Good</b> ●</p>
<p><b>Is the service well-led?</b></p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p><b>Good</b> ●</p>

# Wallace Mews

## 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 Health and Social Care Act 2008.

#### Inspection team

The inspection team consisted of one inspector.

#### Service and service type

Wallace Mew is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Wallace Mews is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

The inspection was announced. We gave the service 24 hours' notice of the inspection. This was because it is a small service which supports people with a learning disability, and we needed to be sure people were prepared for us visiting their home and they had given permission for us to review their accommodation.

#### What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information

providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

#### During the inspection

During the inspection we spoke with 3 people who lived at the service. Not everyone who lived at Wallace Mews was able to speak with us directly, but we observed people looked happy and relaxed in the company of staff. We spoke with 6 members of staff including the registered manager, deputy manager, 2 care workers and 2 kitchen staff. We looked at a range of documents and records and reviewed items on the provider's electronic records system. Following the inspection, we spoke with 2 professionals and 2 relatives on the telephone.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- Care records identified risk and listed detailed, comprehensive actions for staff to follow to mitigate or minimise these risks.
- One person was supported to maintain their food and fluid intake through the use of a tube directly into their stomach. Detailed instructions ensured this process was carried out safely and effectively.
- People had plans in place to support them to exit the building or move to a place of safety in the event of a fire or emergency.
- Regular checks were undertaken on the environment of the home and equipment used.
- We found a number of doors into areas where there were cleaning materials stored were unlocked. We spoke with the registered manager about this, and action was immediately taken to make the situation safe.

### Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- Processes were in place to record any potential safeguarding concerns and to inform the relevant services of these concerns.
- The registered manager logged any concerns on the provider's electronic records system and demonstrated how these were reviewed and tracked, to ensure required action was undertaken.
- Professionals and relatives told us they felt people were safe at the home and told us they had not had cause to raise any safeguarding matters. Staff had received safeguarding training and were aware of how to raise concerns, if required.

### Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- The provider operated safe recruitment processes.
- Appropriate recruitment processes were in place, including the checking of previous employment, the taking up of references and the ensuring Disclosure and Barring Service (DBS) checks were undertaken and reviewed.
- People were well cared for and staff told us there were enough staff to support people's day to day care and activities. The registered manager told us the service was in the process of reviewing staffing needs with the local authority, recognising people's needs changed as they become older. One person told us, "The staff are nice. There are always staff around to keep us safe."
- Relatives and professionals told us there were sufficient staff to support people. One professional told us, "There certainly seem to be enough staff present when I visit. Staff are very visible and always seem very

engaged with people."

#### Using medicines safely

- People were supported to receive their medicines safely.
- People received their medicines in a supportive and appropriate way.
- There had been a number of minor medicine errors at the home in the months prior to the inspection. The registered manager explained how these issues had been dealt with and action taken to address any concerns. Where necessary staff had received refresher training on medicines management.
- The home had very recently introduced an electronic medicines records system, which staff were still acquainting themselves with. The registered manager demonstrated how the new systems worked and how it supported better oversight and safer management of medicines.

#### Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- The home was clean and tidy and there were no malodours around the home. Toilet and bathrooms areas were clean and well maintained.
- Staff had access to a range of personal protective equipment to use when supporting people with personal care.
- There were some minor gaps in cleaning records which we brought the attention of the registered manager.

#### Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.
- Relatives told us they were welcomed into the home and encouraged to visit and participate in all the events and activities enjoyed by the people living there.
- Staff had a good understanding of people's social needs and supported them to maintain contact with family members.

#### Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- Systems were in place to ensure any untoward incidents, accidents or injuries were fully recorded and reviewed and monitored across the organisation, to ensure appropriate remedial actions were taken.

#### Is consent to care and treatment always sought in line with legislation 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 MCA 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 Safeguarding (DoLS).

- The provider was working in line with the Mental Capacity Act.
- The registered manager kept a record of people who were subject to DoLS and when these needed to be renewed or reviewed.
- Where people did not have full capacity to consent to certain treatments or restrictions then best interests



decisions were undertaken and documented in care records.

# 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 our last inspection we rated this key question Good. At this inspection the rating has remained Good. 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 a positive and open culture at the service.
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- The registered manager was fully aware of the requirements from CQC around 'right support, right care, right culture.' People told us staff respected them and listened to them.
- Relatives and professionals told us the service put people at the heart of what they did and empowered people to be the best they can. One relative told us, "(Relative) has really come out of their shell more. They are involved in things, have opinions, talk over ideas with staff and are listened to. They have got a voice."
- Professionals told us the service was extremely proactive in supporting people and staff tried to, "think outside the box."
- Care records were individual and highlighted people's person preferences and choices. Staff strove to support people as individuals. One staff member told us, "It's like having a second family. It is so homely. It's a nice, relaxed atmosphere. Like a home from home."

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 understood their responsibilities under the duty of candour.
- There had been no recent accidents or incidents where a duty of candour response was required, but the registered manager was aware of the process and the need to review such matters.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- A range of checks and audits were carried out at the home. The registered manager demonstrated how senior managers in the organisation had oversight of events and reviewed checking processes.
- Staff told us managers were open to ideas and were approachable if they had any issues, concerns, or suggestions. One staff member told us, "It's all about the service user and making their lives as good as they can be. Working here is like a breath of fresh air compared to other places."

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

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.
- The home had a regular 'residents'' meeting where a range of issues were discussed, and people were encouraged to put forward views and ideas. People told us staff listened to them.
- Staff had a good understanding of people's cultural needs and how these impacted on their care. For example, issues related to religious observance.
- Professionals told us staff encouraged people to participate in reviews, as much as they could and provided an atmosphere where people could express their views.
- There were regular staff meetings. A range of areas and issues were discussed, including the changing needs of people living at the home. Staff told us the registered manager and deputy manager were both supportive, approachable, and amenable.
- Relatives told us they felt part of the service and involved in discussions. They said they were always involved or invited to take part in activities at the home, such as summer fayres and a forthcoming Valentine's event. They said they were kept fully up to date with any health issues.

#### Continuous learning and improving care

- The provider had created a learning culture at the service which improved the care people received.
- Staff told us they had access to a range of training and development opportunities. The homes training record showed that most statutory training was well completed, although some areas were below 80% completion.
- Staff received regular supervision and annual appraisals. Objectives were set during appraisal meetings and reviewed.
- A professional told us they had recently delivered additional training in end-of-life care for people with a learning disability. They told us some staff attended on their days off and the service as a whole fully participated in the process.

#### Working in partnership with others

- The provider worked in partnership with others.
- Professionals said the service was highly proactive in seeking advice or relaying information about individuals. They said staff had a very good knowledge of people and were able to provide information and comprehensive updates to visiting staff, often without the need to refer to care notes. One professional told us, "It's a home from home with a professional element. I've known the service for a number of years. All the staff are very approachable, very accommodating, and very professional."