

Kelam Health Care Limited

# Paxton Hall Care Home

## Inspection report

Rampley Lane  
Little Paxton  
St Neots  
Cambridgeshire  
PE19 6NY

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Tel: 01480213036

Website: [www.paxtonhall.co.uk](http://www.paxtonhall.co.uk)

## Ratings

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

# Summary of findings

## Overall summary

### About the service

Paxton Hall is a residential care home providing personal care to 28 people aged 65 and over at the time of the inspection.

Paxton Hall accommodates up to 39 people in one adapted building.

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

People who lived at Paxton Hall Care Home received care from a staff team who were all caring about delivering an individual based service. Staff knew each person well. People's views were respected, and they were involved in everything that happened in the service. People were happy living there and relatives trusted the staff team to look after their family members. One relative said, "It's wonderful here I couldn't wish for anywhere better for [family member]"

Staff understood the risks to people and the measures in place to keep them safe. Systems were in place to manage people's medicines safely and to reduce the risks associated with the spread of infection.

Sufficient numbers of staff were employed to meet people's needs. Staff received training which gave them the necessary skills and knowledge to carry out their roles and meet people's needs.

Staff delivered care and support that was personalised. Staff were kind, caring and motivated and people, their relatives and external professionals were complimentary about the care provided. Staff respected people's privacy, dignity and independence and encouraged people to lead their life in the way they wanted to.

People were supported to maintain their health. Staff made referrals to health professionals when required. Staff were kind and caring and had developed good relationships with people using the service. People were supported to have maximum choice and control over 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.

People had access to food and drink based on their individual choice and preferences. People had access to a range of activities that reflected their specific needs and interests. There were plans to increase the activities offered especially for those living with dementia.

Care plans were in place which guided staff to provide support that met people's needs which were in line with their preferences.

Systems ensured that people's risks were well managed, and lessons were learnt when things went wrong. There was an open culture within the service, where people and staff could approach the registered

manager who acted on concerns raised to make improvements to people's care. A relative told us, "I can't fault this home. I can't think of anything that would improve it. The staff are great and keep me well informed."

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 11 July 2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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

We always ask the following five questions of services.

### Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

# Paxton Hall Care Home

## Detailed findings

### Background to this inspection

#### The inspection

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

#### Inspection team

The inspection was undertaken by one inspector.

#### Service and service type

Paxton Hall 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. The registered manager was not present at the inspection .

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

We reviewed the information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

#### During the inspection-

We saw how the staff interacted with people who lived at Paxton Hall Care Home. We spoke with eight

people who lived there and two visitors. We spoke with the deputy manager, the provider and four members of the care staff.

We reviewed a range of records. This included two people's care records and multiple medication records. A variety of records relating to the management of the service, including audits and meeting minutes were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at survey results and quality assurance records. We received feedback from a GP who regularly visited 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

- People told us they felt safe at Paxton Hall Care Home. One person said, "Oh yes, I feel safe here." Another person told us, "I feel very safe, the staff here keep me safe." A relative told us, "Staff are keeping [family member] safe. We discussed the use of bed rails."
- Systems continued to be in place to protect people from harm. Staff were clear of what to look out for and who they should report any concerns to.

Assessing risk, safety monitoring and management

- Risk assessments gave staff clear guidance on how to manage risks to people. Staff supported people to take risks in a safe way to maximise their independence, choice and control. Risks included those with poor mobility, choking and using bed rails.
- Equipment in use in the service continued to be maintained and serviced so that it was safe for people to use. This included regular checks of the fire safety equipment to ensure it would be effective in the event of a fire.
- Staff knew how to support people who showed signs of distressed behaviour, this ensured everyone was kept safe.

Staffing and recruitment

- People told us they thought there was enough staff to meet their needs. One person said, "There is always someone around and they answer the call bell as quickly as they can."
- Staff said there were enough staff for the number of people currently living at the service.
- The provider's recruitment policy ensured as far as possible that new staff were safe and suitable to work in the service.

Using medicines safely

- Medicines continued to be managed safely so that people received their medicines as the prescriber intended. One person said, "I always get my medicine on time. The staff are very good and always ask me if I need anything else"
- Staff kept up to date records of all medicines ordered, given and disposed of. Medicines storage was appropriate.
- Protocols guided staff to give medicines prescribed to be given 'when required,' safely.
- Staff continued to undertake training and have their competency checked on an annual basis. Regular audits were conducted, and action was taken when appropriate.

### Preventing and controlling infection

- Systems were in place to make sure that staff practices controlled and prevented infection as far as possible. Staff had undertaken training and were fully aware of their responsibilities to protect people from the spread of infection.
- The environment was clean and tidy throughout. We noted any spillages were quickly attended to. An external professional commented, "The home is always clean and smells nice."

### Learning lessons when things go wrong

- Staff continued to record any incidents and accidents. The registered manager evaluated what might have gone wrong and shared any learning from this with staff.
- Staff meetings gave staff the opportunity to discuss any safety issues, to learn from them and to change their practice if needed.

# 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

- Each person's holistic needs continued to be fully assessed before they were offered a place at the service. Needs were assessed in line current good practice guidance. This initial assessment formed the basis of the person's care plan.
- Staff applied learning effectively in line with best practice, which led to good outcomes for people and supported a good quality of life.
- Care plans contained information about people's needs and it was evident that staff knew people very well.

Staff support: induction, training, skills and experience

- Training courses and development opportunities continued to be undertaken so that staff had the knowledge and skills to look after people well. Staff confirmed they received lots of training and could always ask for other courses that were relevant to gain further knowledge. One member of staff told us, "There is always something new to learn and we have opportunities to attend various training sessions." The feedback from the GP said, "There is evidence of ongoing staff training specifically in relation to the needs of particular residents."
- Staff felt well-supported by the management team and by each other. Regular staff meetings and supervision sessions enabled staff to discuss any issues and get any further support or training they needed. Staff told us the registered manager continued to work alongside staff so that they knew first-hand how well staff worked.

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

- People had choice and access to food and drink throughout the day; food was well presented, and people told us they enjoyed it. One person said, "The food is good, but I enjoy all of my food." Another person told us, "I am happy with the food here and you get a choice. I never get hungry." We did note that those people who were living with dementia who may have forgotten what they had ordered, were not reminded or shown what they had chosen. The deputy manager agreed to make changes in how staff supported these people at meal times.
- Staff were aware of people's dietary needs and any support that they required to eat and drink and to maintain a healthy weight.
- Staff checked people's weight and encouraged people to eat and drink.

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked closely with other agencies such as the local hospitals and GP to make sure that they met

people's needs and provided people with seamless care. The GP told us, "There is a good system of communication with the (GP) practice."

- Referrals to other agencies such as dietician and chiropody were made in a timely manner.

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

- The premises had sufficient amenities such as bathrooms and communal areas to ensure people were supported well.
- Technology and equipment were used effectively to meet people's care and support needs. Such as call bells and sensor mats.
- People had access to plenty of indoor and outdoor spaces where they could choose to be alone, sit with other people or join in activities. The GP commented, "The building and gardens at Paxton Hall are constantly being maintained so that the environment is well kept and safe for all residents."

Supporting people to live healthier lives, access healthcare services and support

- Staff knew people very well and could recognise when they were not well. A person told us, "Staff will get the doctor out if they need to."
- A range of healthcare professionals supported people to stay as healthy as possible. The GP commented, "Health professionals' advice is always followed. We have a very good working relationship (with the staff)."

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff knew how the MCA and DoLS applied to their work. They asked people for their consent before they carried out any personal care and they offered people choices in all aspects of their lives.
- Appropriate applications to the local authority meant that people's freedoms were not unlawfully restricted.

# Is the service caring?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People were supported by staff who treated them with patience, kindness and understanding. Staff described Paxton Hall Care Home as a homely service, and the people who lived and worked there as family. One person said, "The staff, oh yes they are very patient and don't rush me. They always take their time." One relative told us, "The staff are like part of the family to us." One member of staff said, "I like to think the residents are my family and treat them as such."
- Staff were constantly interacting with people, reassuring those who were anxious by sitting next to them, talking with them and holding their hands. The GP told us, "The Staff are always respectful to residents. The residents are well cared for."

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

- People were treated as individuals and supported to make a choice. One person told us, "I can choose what time I get up and go to bed. The staff always check and ask me what I would like to do."
- People were supported to maintain relationships with those most important to them, and relatives told us they were always made welcome when they visited the service. One relative said, "I am always offered a drink and certainly feel very welcome when visiting."
- Staff signposted people and their relatives to sources of advice and support or advocacy; they provided advisors or advocates with information after getting permission from people.

Respecting and promoting people's privacy, dignity and independence

- People told us staff treated them with kindness, dignity, respect and their independence was promoted. One person said, "Staff always let me try to do things for myself and offer help when I am struggling."
- Staff informed us that people's well-being, dignity was very important to them, and ensuring that people were well-presented was an important part of their supporting role. Staff knocked on people's doors before entering. They also called out to let people know who was entering the room.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

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

- People, their relatives and health professionals continued to be involved in the planning of the care and support. One relative said, "Staff are very good in letting me know of any changes to [family member]."
- Staff know each person by name and also knew their likes and dislikes.
- Progress notes were written several times a day so that all staff knew the care each person had received.

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.

- Information for people was available in different formats such as large print and pictorial prompts. This meant information was given to people in different ways to enable their understanding.
- People's communication needs were identified, assessed and recorded in their care plans and staff told us how they used body language or signs as a means to know if non-verbal people might need support.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People told us they enjoyed the various activities at Paxton Hall Care Home. People were seen to be enjoying the chair-based exercise session that was taking place during the inspection. Staff spent time with those people who chose to spend time in their rooms. The deputy manager told us activities for people living with dementia were going to be reviewed as people needs had changed.
- Festivals such as Easter, Christmas and Halloween were celebrated, which helped orientate people to the time of year.
- Staff took time to find out about each person, including their likes and preferences. They spent time chatting to families and getting to know them, which let families know they were as important as the person themselves. One relative told us, "The staff have been very supportive of me as well as [family member]."

Improving care quality in response to complaints or concerns

- Policies and procedures were in place for receiving and dealing with complaints and concerns received. The information described what action the service would take to investigate and respond to complaints and concerns raised.
- People and their relatives told us they felt able to talk to the registered manager at any time and were confident their concerns would be addressed. One relative said, "I haven't had to make any complaints, but I

would I would be confident to speak to the staff and action would certainly be taken."

#### End of life care and support

- The staff continued to support people and their relatives both in planning for and at the end of people's lives.
- The staff team ensured that people's wishes were fulfilled at the end of their lives. They supported people and their relatives to discuss what they wanted to happen. They recorded the details about the person's wishes and how those wishes would be met.
- The home's ethos was that people should be able to die in their home if that was what they wanted. Staff worked closely with the GP and community nurses to make this happen if this was possible.
- Staff had received training in end of life care and additional and refresher training was being booked. This ensured staff remained up to date with current and best practice.

## 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

- People and their relatives said they had a very good relationship with the registered manager and staff team. A relative said, "I often see the (registered) Manager around the home. They are very friendly and approachable. We have regular catch ups."
- The registered manager and staff encouraged feedback and acted on it to improve the service. For example, meetings with people were held and they undertook reviews with people about their care and support needs.
- Staff also told us that they felt very supported and listened to by the registered manager. A staff member said, "I love my job. That's why I am still here. We get good support from the management team. We work well as a team and I think we support each other well." The GP told us, "I am very impressed with the leadership and management of Paxton Hall."
- The previous CQC inspection rating was displayed so people and their visitors could refer to this if they wished to.

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 registered manager and staff team gave examples of learning when something had gone wrong or had been a near miss. They told us how they continue to learn from these and look to reduce the risk of recurrence.

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

- The service was well-run. Staff at all levels understood their roles and responsibilities and the registered manager was accountable for their staff and understood the importance of their roles.
- Audits were completed on a wide range of areas of the service. Information gathered from audits and from the review of incidents and accidents was used to improve the service.
- Staff told us they were well supported. There were staff meetings which provided a forum for discussion. They were encouraged to continue their professional development, undertaking further vocational qualifications. One member of staff told us, "The registered manager and the deputy are very approachable and always willing to help."

