

Jubilee Care Ltd

# The Sandford Nursing and Residential Home

## Inspection report

Watling Street South  
Church Stretton  
Shropshire  
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Tel: 01694723290

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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

### About the service

The Sandford Nursing and Residential Home is a residential nursing care home providing personal and nursing care to 27 people aged 65 and over at the time of the inspection. The service can support up to 35 older people.

People are accommodated in individual rooms across three floors, with access to each floor by passenger lift. Accessible bathrooms and toilet facilities are situated on each floor. People have access to communal areas and direct access to the garden.

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

Systems and processes were in place to help keep people safe and risks associated with their care needs had been assessed. People were supported by enough staff who had been recruited safely. People's medicines were managed safely and they got them when they needed them. The home was clean and staff practice helped to reduce the risk of cross infection. Incidents were monitored to help reduce the likelihood of them happening again.

People continued to receive an effective service which met their care and support needs. Staff training ensured they had the relevant skills to meet people's care and support needs. People had enough to eat and drink to maintain their wellbeing and they had access to the healthcare support they needed.

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.

People were treated well by staff and their privacy, dignity and independence was promoted and respected. Staff had formed positive relationships with people and involved them in making decisions about their care. People felt listened to and treated with kindness.

People received care which was personalised to meet their needs. They had access to activities which they enjoyed and were part of the local community. Complaints were responded to and investigated in a timely way.

The provider and registered manager had oversight of the home and the quality of care provided by staff. People were happy living at the home and enjoyed the positive culture. Staff worked well together as a team, and there was good partnership working with others to meet people's needs. Staff morale was good and staff felt well supported.

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 22 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?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# The Sandford Nursing and Residential 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

This inspection was completed by one inspector, one assistant inspector and one Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

The Sandford Nursing and Residential Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 the inspection

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 took this into account

when we inspected the service and made the judgements in this report.

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service and two relatives about their experience of the care provided. We spoke with eight members of staff including senior care staff, care staff, the domestic supervisor, cook and registered manager.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at a variety of records relating to the management of the service, including policies and procedures.

# 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

- Staff received training in and understood how to recognise and respond to suspected abuse.
- The provider had systems in place to respond to and report concerns about people's safety. The registered manager understood their responsibilities for liaising with the local authority if they had concerns about people's safety.

Assessing risk, safety monitoring and management

- Risks to people were identified, assessed and safely managed. Staff were aware of the risks associated with people's care and knew how to support them safely. One person told us, "I feel very safe here with everyone around and I have this call buzzer to call them if I need anything. I would also say I would trust them with anything."
- The provider ensured people lived in a safe environment. Risks associated with the premises and equipment were managed through a programme of safety checks and maintenance at the home. This included areas such as fire safety, ensuring equipment was in good working order and ensuring all utilities were serviced and safe.

Staffing and recruitment

- People continued to be supported by sufficient staff to keep them safe. People told us they did not have to wait for staff support when they needed it.
- The provider continued to follow safe staff recruitment procedures and made sure staff were suitable to work with people before they started working at the home. Nursing staffs' professional registrations were checked to ensure they were in date.

Using medicines safely

- Medicines were managed and administered safely by nursing staff. One person said, "They are dead good on medicines here. I have some at 6am and they are always on time bringing them into me. It is important to get your medicines right and they certainly do here."
- Where people required time sensitive medicines, such as Parkinson's medicine, antibiotics or pain relief, they received these on time.

Preventing and controlling infection

- People were supported in a clean and tidy environment. One person said, "It's spotless here and hygiene is first class. They (staff) wear gloves and aprons when bathing me. The place is lovely and clean with no smells either."

- Housekeeping staff worked each day to maintain the cleanliness of the home in accordance with the cleaning schedule.
- All staff received training in the prevention and control of infection and had access to personal protective equipment such as disposable gloves, aprons and hand sanitising gels. There was a plentiful supply of cleaning materials and these were safely stored when not in use.

#### Learning lessons when things go wrong

- The registered manager had oversight of all accidents, incidents or near-misses. They reviewed all reports to ensure staff had taken appropriate actions at the time. They told us they looked for any trends which could indicate, for example a deterioration in a person's health or poor staff practice. This helped to ensure lessons could be learnt and further incidences prevented.



# 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 and used to create individual plans of care. These care plans reflected and took account of people's diverse needs, including their religion, ethnicity, disabilities and aspects of their life which were important to them.
- Staff shared information and updates about people's care and nursing needs within the staff team. Communication books and diaries were used as an effective communication tool to aid this.
- People received nursing and personal care which met national current best practice and achieved good outcomes for them. This included the management of specific medicines, infection control and falls prevention and management. This helped to ensure they had a good quality of life.
- The home had been part of a local 'Care to Smile' initiative and had continued this work within the home. This initiative aims to improve oral health for people living in care homes, through staff training and increased access to dental services. Staff followed dental care pathways to provide good oral care to people and staff 'champions' promoted this. People had benefitted from improved oral health as a result.

Staff support: induction, training, skills and experience

- People were supported by staff who had received the training they needed to meet people's needs. One person told us, "They (staff) could not be better. They learn quickly how you are and then register the way they talk to you and what you like. It is cleverly done, they naturally do this which is reflective of the good skills and training they have. They are always on courses for manual handling and things, I simply cannot fault them."
- Staff told us they were supported to gain additional training and qualifications to ensure they understood people's health needs, such as training in Parkinson's Disease and stroke awareness. Nursing staff were also supported to maintain their clinical competencies and professional registrations.
- All staff had supervision meetings with their line manager. This enabled discussions about their practice and what was going well, where things could improve and training.

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

- People were supported to eat and drink enough to maintain their well-being. People told us they enjoyed the food they had, were offered alternatives if they wished and had access to drinks when they wanted them.
- People's eating and drinking needs were assessed and kept under review. Kitchen staff were aware of people's preferences and any dietary requirements, including allergies. The cooks discussed with people what they would like from the menu each day. Allergens were highlighted and menus were written and in pictorial form to assist people to make their choices.

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

- Staff worked with other healthcare professionals to ensure people's holistic health care needs were met. This included GPs, chiropody, dental services, hospital services and community services such as mental health teams.
- People were registered with the local GP practice. The GP visited the home weekly and made additional visits when people were unwell. Records showed people were seen by their GP when necessary and there was effective communication between staff at the home and the GP practice.

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

- The environment met the needs of the people who currently lived at the home. The registered manager told us there was a continual programme of refurbishment of bedrooms and communal facilities. At the time of our inspection one communal bathroom was being refurbished.
- People and their visitors had access to different communal rooms and areas around the home. Signage was sufficient for the people who lived at the home to enable them to easily find their way around.

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 encouraged people to make choices and gained their consent before delivering any care and support. Staff had received training in and understood their responsibilities in following the principles of the MCA.
- The provider and registered manager worked in line with the MCA and DoLS. People's capacity to make their own decisions was assessed in accordance with these laws and principles. This helped to ensure the decisions to deprive people of their liberty were in their best interests and supported their human rights.

# 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 has 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 told us staff treated them with respect and described them as being, "friendly, polite and wonderful". One person told us, "I am very happy here. All the staff are brilliant, so kind and helpful and always make time for a chat."
- People appeared relaxed and happy in their home environment and we saw friendly, considerate and compassionate interactions between staff, people and their relatives. Staff were enthusiastic about their work and showed empathy and warmth when telling us about the people they supported and their work.

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

- People were encouraged to be involved in decision making wherever possible. People told us they were always offered choices and staff respected their decisions. This included choices around how to spend their time or what meals they wanted.
- People were supported and encouraged to express their views about the care they received. They told us they felt listened to and valued by staff and the registered manager. One staff member told us, "Every person is treated equally and fairly. This takes into consideration their different culture and beliefs when we support them."

Respecting and promoting people's privacy, dignity and independence

- People were encouraged to be as independent as they were able, and to mobilise within their own limitations. One person told us they had come to the home following previous falls. They said, "I've not had a fall here. There are always plenty of lovely staff around watching me, but also letting me do what I want to."
- People's privacy and dignity was respected by staff. Everyone we spoke with told us staff treated them in a dignified way and respected their privacy, especially when helping them with their personal care.
- People's care records were kept secure within the home. The registered manager told us they were currently reviewing storage of some care records in line with the General Data Protection Regulation (GDPR).

# 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 received personalised care and support which met their needs. They told us staff supported them in the way they wanted. One person said, "They (staff) have been brilliant in the time I have been here. They have got to know me very well and know what I like to do. They are very well skilled in all they do for me."
- People's care was responsive and kept under constant review. Nursing staff shared information about people's changing health with external healthcare professionals as needed to ensure they were able to respond quickly.
- The registered manager told us after attending a local LGBT plus (lesbian, gay, bisexual, transgender) group event they were using the learning they gained to improve care planning. They wanted to focus on who the most important person was in people's lives to improve staff understanding of the person, their values and experiences. This would ensure more personalised care and support for people who were LGBT plus.

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 were supported to follow their interests and join in activities which they enjoyed. One person said, "You can do anything you want here. I like to read, but they have lots of activities that go on and I join in with everything, even banging a drum!"
- People were able to continue with their chosen faiths and services were arranged within the home. Links with local churches enabled people to attend events there if they chose to.
- People were visited by children from a local nursery who sang, did art and read with them. A local Cubs group visited people and had made Christmas presents for them. One staff member said, "The residents get a lot out of it as do the Cubs. They don't necessarily get to talk with older people, so they really benefit from it too."
- The registered manager told us, since our last inspection the range and availability of activities had increased. The home was registered with a national activities association and the two activity co-ordinators had completed their training in providing meaningful activities for people.

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.

- The provider was meeting the standards of the AIS.

- Staff found out and recorded details about people's communication needs so they could ensure they understood information given to them. The registered manager told us, when needed, they were able to access information in alternative formats to help support people's understanding.

#### Improving care quality in response to complaints or concerns

- People told us if they ever had any complaints they would feel comfortable to discuss it with the staff or the registered manager.
- The provider had a complaints procedure in place. The registered manager investigated and responded to complaints in accordance with this policy.

#### End of life care and support

- People were supported to identify their wishes for their end-of-life care. This included wishes they had for receiving future treatment or for being resuscitated.
- People remained at the home when they required end of life care. The staff team would work in partnership with the persons GP and palliative care nurses, as needed, to keep people comfortable and pain free.

# 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

- The registered manager and staff had created an environment where people were happy and felt safe. People told us they enjoyed living at the home. One person told us, "Everything here is so good and well organised. You can see all the staff are happy, which is reflective of that."
- People and staff were complimentary about how the service was managed and told us the registered manager was always around the home to talk with.

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 and registered manager understood their responsibilities with regards to the duty of candour. We saw openness and honesty had been respected following an incident at the home. This helped to ensure people were supported within an open and transparent culture.

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

- The provider had oversight of the service and supported the registered manager in maintaining the quality of the service. The registered manager had a hands-on approach to care and had plenty of contact with people. They ensured the care team was monitored to ensure high standards of care delivery.
- The registered manager understood the responsibilities of their role and acted in accordance with them. Statutory notifications were sent to us to keep us informed of specific events which happened at the service. The registered persons are required by law to submit these statutory notifications. These ensure that we are aware of important events and play a key role in our ongoing monitoring of services.
- The rating from the last inspection was on display in the home and on the provider's website in line with our requirements.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People were encouraged to share their views and make suggestions on how to improve the service. The provider introduced fresh flowers, kippers and a variety of bread and cheese following discussion and people's involvement.
- People continued to benefit from links within their local community. The registered manager told us they had improved these links since our last inspection. These included links with the local GP practice,

community health teams and local organisations.

#### Continuous learning and improving care

- The registered manager and staff accessed information and advice from other organisations to ensure they provided a service based on current best practices.
- Staff were keen to improve their knowledge and requested training about specific health conditions. This helped them understand people's needs.