

Sabre Court Limited

Sabre Court

Inspection report

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Ratings

Overall rating for this service

Good 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Good 

Overall summary

This inspection took place on 11 December 2014 and was unannounced.

This service changed status on 10 August 2014 becoming a limited company but the providers remain the same. This is the first inspection as a limited company.

This service provides accommodation and personal care for up to eleven adults who have a mental health condition. There were eight people in residence on the day of this inspection.

There was a registered manager at this service who had been registered with the Care Quality Commission (CQC) since 2010. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Summary of findings

People at this service told us that they felt safe and staff had been trained and knew how to respond to any allegations of abuse. The service followed safe recruitment procedures which ensured that staff had been thoroughly vetted before working at the service.

We observed that people had their medicines administered safely. The medication was stored appropriately and properly recorded.

The principles of the Mental Capacity Act 2005 were understood by the registered manager and where people were subject to the Mental Health Act records were up to date.

People received sufficient to eat and drink and had access to facilities for making drinks whenever they wished.

People who used the service told us that they were happy and we could see that people who used the service and staff interacted in a relaxed and friendly way.

People's care needs had been assessed and plans were in place with associated risk assessments which ensured that people's needs were met.

There was a comprehensive quality assurance system in place which identified any areas that needed improvement. These were recorded along with any actions taken.

Staff and people who used the service told us that they felt well supported at this service.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

We found that this service was safe. The people we spoke with who used the service told us that they felt safe. Staff had been trained to safeguard adults.

Medication was administered, recorded and stored appropriately.

Safe recruitment procedures had been followed for this service.

Good



Is the service effective?

This service was effective. Staff were trained and supported appropriately.

The registered manager understood the principles of the Mental Capacity Act 2005.

People received sufficient to eat and drink and had the facilities to make drinks whenever they wished.

Good



Is the service caring?

This service was caring. Staff listened to people and made them feel that they mattered.

People who used the service told us that they were happy and we saw that they were relaxed and open when interacting with staff.

Good



Is the service responsive?

This service was responsive. We saw the service had assessed people's care needs and had drawn up support plans to ensure that people's needs were met.

There were records that showed us that people's care plans had been reviewed and audited by staff.

The service had a clear complaints policy and procedure.

Good



Is the service well-led?

We saw that there was a comprehensive quality assurance system in place at this service.

We saw a business plan and evidence of business continuity planning. The registered manager and director were clear about the key challenges for this service and how they wanted it to develop in the future.

Staff and people who used the service told us that they felt well supported by the registered manager and director who were both involved in the day to day running of this service.

Good



Sabre Court

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 11 December 2014 and was unannounced. The inspection team was made up of one inspector. Before the inspection we reviewed notifications and information we held about this service. We contacted

the local authority contracting and quality assurance team who told us that they had carried out a quality assurance visit to the service and a financial audit had been carried out. They told us that they had not found any areas of concern.

During the inspection we spoke with three people who used the service, interviewed one member of staff, the registered manager and the managing director. We tracked the care and support plans of two people, reviewed records relating to the running of this service such as equipment servicing records and audits and spent six hours observing the care and support given to people who used the service. We inspected three staff employment and training records.

Is the service safe?

Our findings

We found that this service was safe. The people we spoke with who used the service told us that they felt safe and when we spoke with a mental health professional following the inspection they told us that they considered that the people that they had supported in this service were safe. One person who used the service told us that they felt safe and were, “very happy here.”

We saw that there had been no safeguarding alerts for this service and this was confirmed by the registered manager. When we looked at staff training records we saw that all staff had completed training on how to safeguard adults and how to deal with any behaviour that challenged them. The registered manager was aware of how to make a safeguarding alert if they suspected that there had been any incidents of abuse and a member of staff told us that they would report any concerns to the registered manager immediately. This meant that staff were alert to the possibility of abuse and knew how to respond, if necessary.

People who used this service were supported by the service to understand how to maintain their own safety outside the service and they were able to tell us who they would speak to if they needed support. We saw risk assessments in place where people were considered to be vulnerable in the wider community. The risks were identified and clear plans had been put in place to support people who used the service with their agreement. Some people had their money locked away at Sabre Court. This was part of a planned approach agreed with their care coordinator. We saw that clear records were kept in relation to this practice and a recent financial audit completed by the local authority reported that there were no areas for concern. They confirmed that people’s money was managed safely and appropriately.

We saw that people who used the service could come and go as they pleased throughout the day and where they had made a decision that may have impacted negatively on their physical or mental health this was not criticised but support was offered. We saw that there were risk assessments in place for unexpected events such as when people did not return to the service. There were clear guidelines for staff and a list of the places the person usually visited to assist staff in locating the person if necessary. Any accidents and incidents at the service had

been recorded and any actions taken recorded. This meant that people who used the service had the freedom to do as they pleased but that staff knew what to do when unexpected events occurred.

We observed medication being administered and inspected medicine administration records. We saw that medication was stored appropriately in a locked cupboard and saw that drug stocks had been checked and counted weekly and the record had been signed by two people. Medication was administered, recorded and stored appropriately.

When we looked around the service we saw that each person had their own room. Gas and electricity safety checks had been carried out in 2014 and equipment had been checked for safety. Safety checks were up to date. We saw a fire risk assessment which had been completed in April 2014 and records of safety checks of fire fighting equipment and fire alarm checks. The service was well maintained and records were kept of all maintenance and safety checks carried out. This meant that the provider was taking appropriate steps to ensure that people lived in a safe and well maintained environment.

When we looked at the staff files we saw that there was sufficient, suitably qualified staff on duty to meet the needs of the people who used the service. We checked staff employment files and saw that safe recruitment practices had been followed. Two references had been gathered for prospective staff and a criminal record check requested from the Disclosure and Barring service (DBS). This meant that people who used the service were protected because the people who worked at this service had been checked and found to be suitable to work in a care environment.

We asked the registered manager how they assessed the levels of staffing that were needed. They told us that they assessed staffing needs twice a day according to the needs of people who used the service. If someone needed additional support extra staffing was provided by existing staff or themselves. They also made sure that extra staff were on duty, particularly at night when anyone new came to live at this service to give additional support in the first weeks. We saw records of staffing needs assessments that had been carried out. This meant that staffing levels were flexible and supported the needs of people who used the service.

Is the service effective?

Our findings

This service was effective. Staff told us that the provider, “supported me to do my training” and the registered manager told us that all staff completed a thorough induction following Skills for Care guidelines. We saw evidence of this in staff training records. They completed mandatory training and were encouraged to complete a National Vocational Qualification (NVQ) in care if they had not done so. We saw from the training records we inspected that staff had also completed specialised training such as Mental Health and Managing Challenging Behaviour which meant that people who used the service were supported by staff that had the appropriate knowledge and training.

We saw records of staff supervisions that had been carried out regularly and over time by the registered manager which provided support for staff. Staff told us that they were well supported by the director and registered manager saying, “They are great and so supportive.”

In the most recent management meeting held on 8 December 2014 we saw from the minutes that staff training and development had been discussed. Learning needs had been identified within the service and plans for future training discussed which would ensure that staff continued to develop their knowledge.

The registered manager understood the principles of the Mental Capacity Act 2005 and how people’s mental capacity could be affected by drugs and alcohol. However there had not been any reason for decisions to be made in a person’s best interests. The registered manager was aware of how to make an application to deprive a person of their liberty but had not had cause to do so. The local authority held an appointeeship for one person. People who used this service had on occasions been subject to the Mental Health Act. Reviews and actions were appropriately documented and any conditions that had been applied under the Mental Health Act had been recorded and reviewed.

Staff understood what was meant by restraint but no restraints had been used at this service. If people had displayed behaviour that might challenge staff this had been dealt with through communication and support. One person who used the service told us, “Staff are great with people who live here.”

People who used the service had been involved in providing information and contributing to their care plans and gave their consent to say they agreed with the plan. Reviews had been carried out with mental health professionals and social care workers and these were documented in the care plan. Any changes to support or treatment were recorded. For instance one person’s behaviour had an impact on their environment and plans had been agreed with them and a community psychiatric nurse (CPN) to make changes to the environment to prevent any damage or injury. This was clearly documented. A mental health professional that we spoke with following the inspection told us, “The people I was involved with at this service were well supported by staff. I have had no concerns.”

We observed a lunchtime period and saw that people were asked what they wanted to eat. The registered manager told us that they could eat whatever they wished. There was a two course meal on offer which was cooked by staff on the day of our inspection which was omelette, potatoes and beans with chocolate pudding and custard for desert. People sat at tables in the dining room for their meal promoting a family type environment. These had been set by one of the people who used the service. The lunchtime period was calm and unhurried. People who used the service had a separate kitchenette where they were encouraged to make their own drinks throughout the day and night. Weights and dietary preferences were noted in people’s care plans. We saw that people’s nutritional needs were met by the service.

People who used the service were involved in the monitoring of their health. For instance they made appointments with CPN’s or addiction services which were documented. The staff at Sabre Court were notified by people who used the service and professionals if appointments were missed. The reasons for missing appointments was documented and discussed with the person who used the service encouraging them to discuss their support needs. This service worked closely with a variety of community mental health and addiction services who gave support and advice when needed. If people needed more support the registered manager told us that they would contact the appropriate health professional or the person who used the service would make their own appointment.

Is the service caring?

Our findings

This service was caring. One person who used the service told us, “They are great, the best landlords I’ve ever had.” Another person said, “I am very happy here.”

One person told us that they had wanted their room decorated in the same colours as their favourite sports team. They told us, “They took my (sports) top to the shop to choose the colours for my bedroom.” It was clear when they were telling us this that they felt that they mattered to the director and registered manager and that they were listened to at this service. We saw on the day of our inspection that staff listened to everyone and spent time with them when it was needed. They knew people well and were able to discuss families, hobbies and interests as part of their everyday conversations which demonstrated their good relationships.

We observed that each person was treated as an individual and treated with respect. Staff had a good rapport with people and used humour to communicate. There was a calm and friendly atmosphere at this service. People who used the service were relaxed and smiling. When we walked around the service we saw that staff knocked on people's doors before entering and we heard them ask permission to enter showing respect for people.

People who used the service approached the registered manager and the managing director throughout the day and were relaxed and open in their interactions. It was evident from the way in which people who used the service engaged with them that they were involved in the day to day running of the service.

People who used the service were supported by their families, the community mental health team, addictions service and care co coordinators. The staff at Sabre Court told us that they encouraged people to access support if it was needed and they encouraged people to maintain family relationships where appropriate. One person was on their way out to visit a relative when we arrived at the service.

The registered manager had started to produce a newsletter in November 2014. It gave information about what was happening in the local community, shop opening times and any activities planned by the service. People who used the service had been invited to assist with putting up the Christmas decorations and one person joined in and enjoyed themselves.

Is the service responsive?

Our findings

This service was responsive. We saw the service had assessed people's care needs and had drawn up support plans to ensure that people's needs were met. Records confirmed that people had been involved in planning their care either with the staff at this service or with their care coordinator. One person told us, "It makes a difference having this support." The staff member we interviewed was able to tell us about the needs of the people who lived at this service.

The care plans were person centred, highlighting the needs of each person. People who used the service led independent lives and the care and support plans reflected this. If people required more personal care or emotional support it was given by staff. One person told us "They really look after us here.". The care plans included physical health, mental health, personal hygiene,

emotional support, dietary preferences and care of their room. People had signed their care plans and had a contract in place with the service.

There were records that showed us that people's care plans had been reviewed and audited by staff. People were seen regularly by social care coordinators or mental health workers to review their care needs. Records of appointments were seen in people's care files and reasons for non-attendance noted.

There were no organised activities but people who used the service were very much part of the community with their own friends, families and individual interests. One person living at the service had a job which they attended every morning. Another person living at the service told us "I go out quite a lot. I have a lot of friends". We saw people who used the service coming and going throughout the day and staff encouraging people to be as independent as possible.

There had been no complaints about this service but the registered manager showed me the policy and procedure for dealing with complaints which was reviewed annually. When we asked people how they would make a complaint they told us that they would speak to the managing director or the registered manager. One person said they would speak to their support worker if they had any concerns about the service.

Is the service well-led?

Our findings

This service was well led. We saw that Sabre Court had signed up to the Social Care Commitment. This was a government initiative whereby the organisation agrees to provide a high quality service by carrying out specific tasks such as using safe recruitment practices and promoting a positive culture. We saw evidence that the service had done this from the records that we observed.

We saw that there was a comprehensive quality assurance system in place to maintain standards at this service. This included an environmental audit which had fed into the development plan for 2014 – 2020. This provided up to date information about improvement plans for the service. We saw that there was an on-going plan of improvements for maintaining the fabric of the service and when we looked around we could see that some of those improvements were in place such as decoration and renewal of furniture.

We saw that care plans had been evaluated every week by the key worker and audited every four weeks. Records of these audits were kept in the care files. Systems of recording and maintaining documents used by the service were well ordered and accessible. The records we inspected were up to date, regularly reviewed and audited in line with Data Protection Act 1998 principles.

We saw evidence of management meetings and business continuity planning and clear policies and procedures relating to this. The provider and the manager told us about some of the developments within the service and we saw a business development plan which outlined future plans. These included areas such as planned staff recruitment and training and the planned maintenance of the property.

The registered manager and managing director were open and frank in their discussions with us during our inspection.

They were clear about the key challenges for their service. When we spoke with people who used the service and with staff they told us that they felt supported by them both. Staff were clear about their responsibilities working at this service. One staff member told us they had been supported by both the registered manager and the managing director to complete a qualification in mental health which helped them in their role. There was a culture of inclusion and support at this service.

People who used the service had been given questionnaires and five out of the eight people had responded with consistently positive comments. Staff told us that the directors discussed any changes with them and sought their opinions for improvements. The registered manager told us that they spoke with people on a daily basis. They had recently asked how some people wanted their rooms decorated and had carried out people's wishes.

In the last year the managing director had reviewed the policy for smoking in the property and people were no longer able to smoke in the service although an area had been provided on the outside patio. People who used the service told us at this inspection that this had been a positive change. We could see that the hallways and bedrooms had been decorated and upgraded to a high standard since this change which had made a positive difference to the appearance of the service.

There were staff meetings held at the service. The service had a very small staff team and the registered manager told us they saw staff every day and had informal meetings with them at hand overs, between shifts and throughout the day. We saw that records had been kept of staff attendance at more formal meetings.