

Sanctuary Home Care Limited

Sanctuary Home Care Ltd - Gravesend

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 ●

Summary of findings

Overall summary

This inspection took place on 26 August 2016. The provider was given 48 hours' notice as they are a domiciliary care provider and we needed to be sure staff would be available to meet with us.

Sanctuary Home Care Ltd – Gravesend provides personal care and support to people living in their own homes. The service supports some people on a 24 hour basis and others who may require support with personal care needs at specific times of the day and or night. At the time of the inspection 12 people were receiving support with their personal care needs. All the people using the service were residing in the provider's supported living scheme flats. Sanctuary Home Care Ltd – Gravesend operated from the same building complex and was staffed every day of the week, both night and day to provide personal care to people living at the service.

This is the first comprehensive inspection of the service by the Care Quality Commission (CQC) since registration in February 2016.

The service had a registered manager. 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.

People were provided with equipment according to their individual needs, such as wheelchairs and other mobility aids. The building was well maintained and decorated.

Staff supported people to be safe at the service and in the community. People's needs were assessed and any related risks to their health and safety identified. Support plans were in place to guide staff on how to manage the known risks safely. People received their medicines as prescribed from staff who had been assessed as competent to do so.

There were sufficient staff available to support people and people had a choice of staff that supported them. People were supported by staff recruited through a robust recruitment process.

The service met the legal requirements of the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguard (DoLS). The service ensured people who lacked decision making capacity received the support they required to understand and make decisions relating to their care.

People were asked for their consent to the care and support they received. People and staff said the registered manager was easily available, approachable and friendly and ensured the service operated effectively.

Staff were supported to develop in their role. Staff received regular supervisions and appraisals to reflect on their performance. Staff used feedback to improve their practice and took up training to address any gaps in

their knowledge. Staff attended regular training courses which enabled them to plan and deliver people's support as required.

People's health needs were assessed and their relatives were involved in planning and making decisions about their care and support. People's support plans identified the care and support they needed and how they wanted it provided. People received care and support which reflected their choices and preferences. Staff met people regularly to discuss their support plan to ensure their support reflected any changes in their needs.

Staff knew people's routines and supported them to pursue their hobbies and interests. People were encouraged to be as independent as possible.

People were supported by staff who understood their health needs and recognised changes to their well-being. The service communicated well with healthcare professionals to ensure people received appropriate care and treatment.

Staff supported people to eat and drink as required and encouraged them to eat healthily. People told us they were happy at the service and said staff were polite and caring. Staff treated people with dignity and respect and provided their care in a compassionate way. People received the support they required to communicate their views about how they wanted to be cared for.

People and their relatives were asked for the views and their feedback was used to develop the service. People were aware of the complaints procedure. The registered manager responded appropriately to complaints at the service in line with the provider's complaints procedure.

The registered manager regularly monitored and reviewed the quality of the service and the support they provided to people. Where required, the service took action to ensure improvements were made.

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. People were safe from the risk of avoidable harm. Risks to people's health and safety were identified and managed to keep them safe. Staff regularly reviewed risks to people and supported them to live safely.

There were sufficient numbers of staff to support people safely and meet their needs.

People received the support they required to take their medicines safely as prescribed. Staff understood how to protect people from the risk of infection.

Is the service effective?

Good ●

The service was effective. Staff received regular training and ongoing support they needed to develop skills to meet people's needs.

People were supported in line with the requirements of the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards.

Staff obtained people's consent to care and treatment and respected their choices.

People received the support they required with their nutrition and hydration. Staff worked in partnership with other health care professionals and supported people to access the healthcare services they needed.

Is the service caring?

Good ●

The service was caring. People told us staff were kind and caring. People and their relatives were involved in planning their care and support.

People were supported by staff who knew and understood how to communicate with them about their needs and preferences.

Staff respected people's confidentiality, privacy, dignity and promoted their human rights.

Is the service responsive?

Good ●

The service was responsive. People's individual needs were assessed. People received care and support which met their individual needs.

People were asked for their views and about the service and were confident any concerns they had would be listened to and addressed.

People were supported to participate in activities of their choice. Staff encouraged people to develop and maintain their independence. Complaints were appropriately responded to.

Is the service well-led?

Good ●

The service was well led. People and staff said the service was well run and the quality of the service good.

The registered manager welcomed people's ideas and staff suggestions for improvement. Staff and people said the registered manager was approachable and effective.

The service carried out checks on the way the service operated and improvements were made when necessary.

Sanctuary Home Care Ltd - Gravesend

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 26 August 2016 and was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to be sure the registered manager and staff would be available to talk to us. The inspection was carried out by an inspector.

Before the inspection, we reviewed all the information we held about the service. This included statutory notifications sent to us by the registered manager about incidents and events that had occurred at the service. A notification is information about important events, which the service is required to send to us by law. We used this information to plan our inspection.

During the inspection we spoke with four people using the service and a person's relative. We spoke with the registered manager, four members of staff and two community nurses who were visiting people at the service.

We reviewed six people's care records, three medicines records and eight staff records which included their recruitment, training records and staff duty rotas. We looked at information on how the provider assessed the quality of the service and feedback that the service had received about people's views of the service. We looked at other records relating to the management of the service.

After the inspection, we spoke with five relatives and three healthcare professionals.

Is the service safe?

Our findings

People were safe at the service. One person told us, "I am comfortable around the staff who help me. I feel safe during the day and in the night." Another person said, "I have nothing to worry about." A person's relative said, "[Person's name] is well looked after. I see how staff treat people. I have no concerns."

People were safe because risks to their health and safety were identified and managed by the service. For example, there were plans to support people at risk of falls, malnutrition, self-neglect and to ensure people were safe in the community. The risk assessments showed the level of risk to people and the action required to minimise the risks where possible.

The service involved people in assessing and identifying risks to them and how they wished to be supported to be safe. Staff had sufficient guidance about how to minimise risk of harm to people. For example, one person told us they agreed with staff the times they would check on them and had their call bell within easy reach so they could summon assistance when needed. We confirmed from care records and observations during our inspection that this person was supported as planned. Records showed staff regularly reviewed risks to people and ensured their support plans were updated to reflect people's changing needs.

People were protected from the risk of developing avoidable pressure ulcers. Staff understood the risks to people who stayed in bed for long periods of time and the appropriate preventative action to minimise the risk of pressure sores. Staff were able to explain how to support each person to relieve pressure using pressure mattresses and cushions. Records showed people were supported as planned to turn in bed at regular intervals and when requested to do so by a person.

People were protected from the risk of avoidable incidents. The service maintained a record of accidents and incidents that happened at the service and any action taken to minimise the risk of the situation happening again. The registered manager monitored any potential trends and put plans in place for any future action required to prevent a reoccurrence to keep people safe. Records showed after an incident of a fall the registered manager had updated a person's mobility support plan to reduce the risk of further falls.

People were supported by staff who understood how to protect them from the risk of abuse. Staff we spoke with understood their role in recognising abuse and their responsibility to take action to keep people safe. Staff were able to describe the signs and symptoms of abuse and the safeguarding procedures to follow and report if they had any concerns about a person's safety. Staff told us they felt confident the service would take their concerns of potential abuse seriously to ensure people were protected from the risk of harm. People were supported to understand what abuse is and how to report it. One person told us, "The manager discussed with me how to keep safe and what to do if I was not being treated fairly." People and their relatives told us they had received information from the service about how to keep safe and report abuse. Staff knew how to 'whistle-blow' to escalate their concerns to external bodies such as the local authority or CQC about abuse or poor practices to keep people safe.

People received their medicines safely as prescribed. People told us they received the support they needed

with their medicines. The service had carried out assessments on whether people needed any assistance with their medicines when they started using the service. This was reviewed when a person's needs changed. Care records showed how people preferred to be supported with their medicines. There was guidance in place for staff on how to support people to self-administer medicines where appropriate. People were aware of what medicines they were required to take and when to take them and their care plans contained this information.

The service ensured people's medicines were managed safely. Staff signed a medicines administration record (MAR) chart when they administered a person's medicines. Records showed an audit of MAR charts and stocks of medicines was carried out by senior staff. We reviewed some MAR charts and saw they were fully and accurately completed. People had received all their medicines at the prescribed times and dosages.

The provider ensured people were safe by using a robust recruitment process. Records showed job applicants had completed an application form with details of their qualifications and experience. The registered manager had maintained the applicant's form and interview notes on their performance at the interview which demonstrated they had the appropriate knowledge and skills to support people using the service. The provider had obtained criminal record checks, evidence of their identity, right to work in the country and written references from their previous employer to confirm their suitability. Records showed new members of staff did not start to work at the service until these checks had been completed.

People and their relatives told us there were enough staff on duty to meet people's needs. One person told us, "I do not have to wait long for staff to come when I use the call bell." The service determined staffing levels based on people's needs and the support they required. Some people required support throughout the day and night whilst others had care and support provided at set times depending on the needs and care they required. There was a regular and consistent staff team based at the service that provided support and care to people using the service. One person told us, "I know all the staff who help me. They know me well and how I want things done." During the inspection we observed staff were able to meet people's needs and respond to their requests for support without delay. Healthcare professionals told us the feedback they received from people and their relatives was positive and care was delivered as planned.

People were kept as safe as possible. People knew who to contact during office hours and in the evenings and weekends if they needed additional support or help. The service ensured people and their relatives had the contact numbers which made people feel safe.

The service was well maintained and clean. The provider's supported housing management undertook health and safety checks to ensure the building and equipment were safe and suitable for people to use. Staff understood infection control practices and took measures to ensure that the service was clean and free from the risk of infection. One member of staff told us "I use aprons and gloves when supporting people with personal care. The protective clothing is widely available at the service." Staff were able to explain to us how they used correct hand washing techniques to minimise the risk of cross infection.

Is the service effective?

Our findings

People told us they received care from staff who were well trained and understood their needs. One person told, "I am fine and staff are good." Another person said, "Staff are very nice and know what help I need." A relative told us "Staff know what they do and look after [relative's name] well."

Staff received regular training which enabled them to carry out their roles competently and to meet people's needs. One member of staff told us, "The manager organises loads of training for us." Staff told us they were booked on refresher courses when they were due. Staff had attended training on moving and handling, infection control, first aid and safeguarding adults. Staff had received additional training in equality and diversity, dementia awareness and end of life care.

Staff were supported in their professional development in relation to carrying out their responsibilities. The registered manager told us, "Through professional development, we identify areas people excel in and encourage them to develop. It motivates staff and creates a nice working atmosphere." Some senior members of staff were enrolled on a management development programme whilst other staff were working towards completing relevant qualifications, such as a diploma in health and social care or a national vocational qualification (NVQ) level 3. This ensured staff were up to date with best practice guidelines and to develop the skills and knowledge to support people.

Staff received the support they required to develop the skills and competence in their role. Records showed all new staff were provided with induction training to ensure they were competent at meeting people's needs before they started to support them. This included e-learning, classroom based training and a workplace introduction. New staff 'shadowed' experienced members of staff to enable them to get to know people and how they wanted their care to be delivered. A new member of staff told us, "The induction was detailed. I got to know people well before starting to work on my own." The registered manager observed their work practice to check they were competent during their probation period. Records confirmed new staff were permanently employed after the registered manager had assessed them as competent and safe to provide people with care.

Staff told us they felt well supported in their roles. The registered manager ensured staff received regular supervision sessions and staff were able to discuss their work. A member of staff told us, "I find supervision helpful." Another member of staff said, "We are a small team. The manager makes sure we do things the right way." Although the service was still new, staff had started to receive their appraisal within the last month to review their performance and set objectives for the year.

People gave consent to the care and support they received and staff respected their choice. Staff told us they understood the importance of obtaining consent from people before care or treatment was provided. Staff had received training on the principles of the Mental Capacity Act 2005 (MCA). Staff told us where people lacked the mental capacity to make decisions they followed the service's procedures on the MCA to ensure any decisions were made in the person's best interests.

People's rights were upheld in line with legislation. At the time of the inspection no one was subject to the Deprivation of Liberty Safeguards (DoLS). The registered manager worked closely with the local authority to ensure people were not unlawfully deprived of their liberty. Staff understood the provider's procedure about Deprivation of Liberty Safeguards (DoLS).

People had the options of making their own meals in their flats, buying meals from an in house canteen within the supported housing scheme where they lived or eating out. People could eat their meals when and where they chose. The service did not cook or prepare meals for people. People told us they had a choice of food and the chef would always make something especially for them, if they did not like any of the options on the menu. One person told us "I like to eat in the cafeteria and sometimes in my room. I can have what I want."

Some people had complex health needs which had an impact on their diet. Staff knew how to support a person manage their weight and took appropriate action to reduce the risk to their health. Staff had obtained information from the GP and dieticians about how a person's dietary needs should be met. Care records showed that the service monitored person's weight. We saw the service had taken effective action to support the person to maintain a healthy body weight by encouraging them to eat healthily.

People were supported to receive the health care they needed. People confirmed they were supported to make an appointment with their GP when they wanted to and to access their dentist and optician as appropriate. Care records contained information about people's health needs and medical conditions along with guidance for staff to ensure people received the support they required. Staff told us they worked with people's relatives to ensure people received the health care when needed. People were referred to specialist health care professionals to meet their specific needs to manage health conditions such as dementia and diabetes. For example, on our inspection, we saw community nurses who had visited a person at the service.

Is the service caring?

Our findings

People and their relatives told us staff were kind and caring. One person told us, "Staff are polite and friendly." A relative told us, "I would say the staff are wonderful." Another relative said, "I have seen staff take their time to talk and listen to [relative's name]. They do not seem rushed."

People told us they had good relationships with staff. A relative told us, "[My relative] has got to know the staff well and is happy with the time they spend with them. They have a good understanding of what help they need."

People were treated with respect and their privacy and dignity upheld. One person told us, "Staff knock on my door and wait to be invited in." Another person told us, "My carer always ask, is it alright if I help you to wash now." A member of staff told us, "We make sure that doors are closed when we support people with personal care." People were able to spend private time in their flats when they chose to throughout the day. People told us staff respected their space and did not interrupt them when they received visitors at the service. Staff told us they knew people's preferred names and called them as they wished.

People told us staff encouraged them to be as independent as possible. One person told us "I have my routine to do what I can for myself and staff respect that." Records showed staff supported people to do things for themselves as stated in their support plans. For example, a person told us, "I decide the times I wake up and agree with staff when I can have my daily wash. Staff are not fussy about my daily plans." Care records showed staff supported people according to the support they needed such as prompting or assisting them in completing tasks.

Staff understood people's communication needs which ensured they provided people with the appropriate. Care records showed people's ways of communication and how staff were to support them to get their needs and wishes understood. For example, staff told us they felt they knew the people at the service and could tell from the changes in their behaviour if there was something worrying them. They used this knowledge to reassure the person and ask if there was anything they could do to support the person. Staff told us and records confirmed they had information on how to use sign language and fingerspelling for a deaf person using the service.

Staff knew people's preferences, interests including their preferred daily routine and supported them as they wished. For example, one person told us, "I like to make my own tea." Another person told us, "Staff know when to come around for my wash." Staff knew how to interact with people in a meaningful way. Information was included in people's care records about their preferences so that staff could provide them with support in line with their wishes. People using the service could choose whether they received personal care and support from Sanctuary Home Care Ltd – Gravesend or any other domiciliary agency of their choice.

Staff promoted people's independence and encouraged them to do as much as possible for themselves. Whilst some people needed assistance with their mobility, some people were able to move around the

service independently using mobility aid such as an electric wheelchair. One person told us they often received visitors at the service and sometimes went out of the service on trips with a relative. Some people attended a day centre and visited cafes and local clubs and took an active part in community life. People were encouraged to participate in daily living activities for example people took turns to assist with cooking and food shopping. Some people also helped in the preparation of food.

People were supported to maintain relationships that were important to them such as friends and relatives. Staff told us they made telephone calls and where family members could not visit staff arranged for people to go and visit them. People's rooms were decorated as they chose with personal items such as ornaments and photographs of family members, friends and special occasions in their lives. Relatives told us they enjoyed visiting the service and were made to feel welcome and could easily speak to people in private if they wished.

People's health information was kept securely. Staff were aware of the importance of maintaining people's confidentiality. They understood and followed the provider's data protection procedure on sharing people's information with other healthcare professionals involved in their care.

Is the service responsive?

Our findings

People received care and support that met their individual needs. Staff assessed people's needs and the support they needed before they began to use the service. Care records showed staff met with people, their relatives and healthcare professionals involved in their care to obtain information in order to complete an assessment of the person's needs. The service re-assessed people's needs six weeks after their admission to check whether the service continued meeting their needs and that their care was being delivered as planned. Assessments included information about people's background, health, preferences which enabled the service to plan and deliver people's support in a personalised way. Care records showed details of how people wished to receive their care and confirmed staff supported them accordingly.

People received care and support that was appropriate to their current level of need. People's care plans were regularly reassessed to ensure they were up to date and when required changes were made to their support plans. One person told us, "I discuss the progress I am making with my health. I am working towards my goals and the manager makes sure I get the support I need." Another person told us, "I have meetings with staff and talk about any changes to my health." A relative told us they were involved in regular reviews of people's care and when they were changes to their health conditions. Another relative said, "Staff will ring us and discuss [person's name] welfare and make necessary changes to how they support them." People received appropriate care as staff were aware of changes in their needs and the support they required.

Staff monitored people's needs and ensured they updated their records if there were any changes. For example, staff had documented additional support a person required with their mobility after a visit from a healthcare professional. People received appropriate support with any physical disabilities they had. When people used mobility aids, such as a walking frame, their records explained how staff should support them to use it safely.

People and their relatives knew how to make a complaint if they were unhappy about any aspect of their care and felt confident the service would take appropriate action to resolve their concern. One person told us, "I have no complaints. I would speak to the manager if I was worried about anything." A relative told us, "The manager resolved an issue we had. I have not had any complaint since." Records showed a person had received an acknowledgement and a full written response to the concern they had raised. We saw the service monitored complaints to ensure all concerns were investigated and were addressed promptly to improve people's experiences in line with the provider's procedure.

The registered manager obtained people's and their relative's views about the service and used feedback to improve the quality of the service. People and their relatives told us the registered manager listened and responded to their concerns. The registered manager regularly held drop in sessions with relatives which enabled them to discuss any changes they wished to see at the service. We saw compliments written by people and their relatives who sent cards and emails to the registered manager. One person had written, "I'm happy with what the carers do". Another person said, "Staff are good and reliable. I'm happy with them."

Is the service well-led?

Our findings

People, relatives and staff told us they were happy with the service. One person told us, "This is a very good place. The staff do a great job." Another person said, "Everything seems to be running smoothly." A relative told us, "[Person's name] has settled well." A healthcare professional told us they were happy about the way the service is run because in their experience people received effective and reliable support.

People and staff told us there was a positive culture in the service and they had been involved in the development of the service. Staff knew of the provider's visions and values which were available on the office's notice board and easily accessible to people, relatives and staff. The registered manager and staff shared the provider's vision and enthusiasm about how they wished the service to be provided. This showed in the way they responded to and spoke about the people they were caring for with respect.

Staff felt able to raise any concerns they had about the service at team meetings organised by the registered manager. Records of the meetings showed staff were able to give their ideas on improving the service and how people should be supported. Staff told us the team was small and knew each other well. Staff told us there was clear communication amongst the staff which ensured they were all aware of people's needs and the support they required. Staff told us teamwork was good at the service. One member of staff told us, "We are a good. We help each other." The registered manager reminded staff of the expected standards of conduct and ensured staff were aware of the service policies and procedures and discussed these in staff meetings.

People were supported by staff who were open and transparent in relation to the way they provided their care and treatment. Staff told us the registered manager promoted openness and transparency and were encouraged to learn from mistakes. This ensured they improved the quality of service people received. The service kept a log of incidents and accidents that happened at the service and the action staff had taken after the incident. The registered manager used this information to review whether staff had followed the service's procedures and shared findings to aid learning and improve the service.

The quality of the planning and delivery of the service was subject to regular checks to ensure people received appropriate care. The managers carried out spot checks and identified any areas that required improvement. The registered manager carried out regular audits of care plans and risk assessments to check that staff had delivered people's care as planned and followed the organisation's procedures. We saw the registered manager reviewed medicine administration charts to ensure people received their medicines and that staff were following the correct procedures. The registered manager reviewed the quality of daily observation records and care plans to ensure they were up to date and accurate. Reports showed appropriate follow ups were made if there were any issues which required addressing through staff supervision and training.

There were regular tenant's meetings for people who lived at the supported living scheme including the people using the service. The service encouraged and supported people to attend. The meetings provided a forum for people to have a say in the way the supported living scheme was run, for example at a meeting in

May 2016 people were reminded to be respectful to each other, staff and visitors. Staff explained to people at the meeting how the pull chords and pendants worked. The service had invited community police officers who spoke at the meeting to raise people's awareness regarding their safety at the service and in the community. People were asked to give their views about if there was anything particular they would like to see done. The service had started to install hand rails in all flats as requested by people at a previous meeting. The service had encouraged people to put themselves forward for a voluntary role if tenant liaison representative to promote effective communication between people using the service, leaseholders and staff. This was still being considered at the time of our inspection.

Staff told us they used daily meetings and people's daily notes to share appropriate information about changes in people's health. Team minutes records showed the registered manager had a theme of the month for every meeting and had discussed safeguarding. They discussed with staff any changes and updated staff on how to meet effectively meet the person's identified needs.

People, their relatives and staff described the management to be approachable, open and supportive. People and staff told us the registered manager was usually at the service and was readily available to them. One relative told us, "They're very on the ball." During the inspection we saw people going into the office just to have a cup of tea or a chat. The registered manager, provider and staff clearly understood their responsibility to each person using the service. Staff were aware of the service's policies and procedures and told us they understood how they used them when providing support to people.

Staff felt well supported in their role. Staff we spoke with described their role with pride and explained their commitment to supporting people. They told us there was a clear structure of responsibility and they knew the senior members of staff on duty at all times. One member of staff told us, "Staff morale is good". The service had general and senior staff meetings both organised by the registered manager. Staff said they learned a lot during these meetings. For example they discussed how to support people as they were getting older and their needs were changing. Notes of these meetings showed staff were able to give their ideas on improving the service. The meetings were also used to discuss findings from audits and to share learning from training courses staff had attended.

The service adhered to the conditions of their registration and had notified the Care Quality Commission (CQC) of all significant events which had occurred at the service. There was a registered manager in post and were aware of what incidents the CQC were to be formally notified of.