

## Franklin Homes Limited

# Sunningdale House

## **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

Rating at last inspection: Requires improvement (published 12 December 2017).

About the service: The service is a care home for up to 13 people with mental health issues some of whom had additional needs due their learning disability and/or autism. When we inspected 12 people lived in the service.

Why we inspected: This inspection was a scheduled inspection based on the previous rating.

People's experience of using this service:

The registered manager had worked to recruit, coach and develop the staff team in the past year. This had led to a motivated group of staff who worked to provider person centred care to people.

People told us they were happy and felt staff had a good understanding of their needs and preferences. That staff listened to what they wanted and acted quickly to support them to achieve their goals and aspirations.

People had good community networks which were personal to them. This included supporting to connect and maintain contact with family and friends.

Staff were well trained and skilled. They used their skills to protect people and promote their independence and rights.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

The registered manager and staff team worked together in a positive way to support people to achieve their own goals and to be safe. Checks of safety and quality were made to ensure people were protected. Work to continuously improve was noted and the registered manager was keen to make changes that would impact positively on people's lives.

The values of the organisation of offering choice, inclusion and respect were embedded. This supported people to receive the positive service described.

The service met all the values that underpin the 'Registering the Right Support' and other best practice guidance such as 'Building the Right Support' apart from the recommended size of a service. However, the values including choice, promotion of independence and inclusion were seen and people did receive a person-centred service. People with learning disabilities and autism using the service lived as ordinary a life as any citizen.

A full description of our findings can be found in the sections below.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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	



## Sunningdale House

**Detailed findings** 

## Background to this inspection

The 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 checked 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.

Inspection team: One inspector carried out this inspection on both days. On day one an expert by experience supported the inspection. 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 service is a 'care home'. People in care homes receive accommodation and personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at on this inspection.

The service had a manager registered with the CQC. 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 on day one and we told the registered manager we would be visiting on day two.

#### What we did:

Before inspection: We reviewed information we had received about the service since the last inspection. This included details about incidents the provider must notify us about, such as abuse; and we sought feedback from the local authority and professionals who work with the service. We assessed the information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During and after the inspection: We spoke with 12 people who used the service during our visit and three relatives over the telephone to ask about their experience of the care provided. We also spoke with one visiting professional.

We spoke with six members of staff including the registered manager, senior care workers and care workers.

We reviewed a range of records which included two people's care records and three people's medicine records. We looked at multiple records relating to the management of the service and a variety of policies and procedures developed and implemented by the provider.



## Is the service safe?

## Our findings

Safe – this means people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong.

At the last inspection in October 2017 the provider breached regulations relating to safe care and treatment. During this inspection we found improvements had been made and the provider was no longer in breach of regulations.

- •Staff understood where people required support to reduce the risk of avoidable harm. Care plans contained explanations of the control measures for staff to follow to keep people safe.
- •The environment and equipment had been assessed for safety.
- •People were supported to take positive risks to aid their independence. For one person this had included regaining their mobility to access the local shops themselves.
- •Staff understood the support people needed to prevent a relapse of their mental health. Care plans contained each person's own view on what support they required from staff at such times.

At our last inspection in October 2017 we recommended that the provider implement effective control measures where people chose to smoke inside the building when it was against the law.

- •The registered manager had reviewed the environment to reduce the risk of ignition in people's rooms. They had worked with the local authority to access smoking cessation information for people. The fire brigade and police were also involved in monitoring risk and increasing awareness with people around the hazard they created to others and themselves. Increased fire drills had been undertaken to ensure people knew how to respond should a fire occur.
- •The registered manager responded appropriately when accidents or incidents occurred and used any incidents as a learning opportunity.

#### Staffing.

- •People and their relatives told us they received care in a timely way. The registered manager monitored the amount of staff needed based on people's needs and their activities and appointments.
- •The amount of staff on duty had increased since the last inspection. This had impacted positively on the support people received and the outcomes they achieved. These are described in the other sections of this report. A visiting professional told us, "Working on delivering three staff per shift has made a real difference to people."

Safeguarding systems and processes, including recruitment.

•The provider had effective safeguarding systems in place and all staff spoken with had a good understanding of what to do to make sure people were protected from harm or abuse. They had received

appropriate training in this topic area. The registered manager used team meetings to reflect on events in the service with staff to understand if they could safeguard people better or promote their rights. One member of staff told us, "We advocate for people's rights as a team, we support people with their preferences and provide people the opportunity to make informed decisions.

- •People and their relatives told us they felt safe being supported by members of staff. The provider's safeguarding policy was available to people in different formats such as 'easy read' to empower them to understand how to raise concerns.
- •The provider operated a safe recruitment process. Including the use of agency workers.

Managing medicines safely.

- •Medicines were safely received, stored, administered and returned when they were no longer required. People were encouraged to manage their own medicines where they had those skills.
- •Where errors were found during checks we saw they were investigated.
- •People told us they were happy with the support they received to take their medicines.

Preventing and controlling infection.

- •Staff followed good infection control practices and used personal protective equipment (PPE) to help prevent the spread of healthcare related infections.
- •Each person was supported to take responsibility for their own bedroom area. At times people had not maintained cleanliness. We discussed with the staff how they could support people in innovative ways to maintain their own space. On day two the registered manager and team had instigated changes and people were keen to show us how proud they were of their own rooms. The registered manager implemented a new process to check standards remained good in this area.



## Is the service effective?

## Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

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.

- •Assessments of people's needs were thorough and people's goals or expected outcomes were identified. Care plans were regularly reviewed to understand progress and make plans to support people to achieve their goals.
- •Staff applied learning effectively in line with best practice, which led to good outcomes for people and supported a good quality of life. For example, staff were aware of people's needs relating to their mental health and the person-centred approach needed to prevent a relapse for everyone. A relative told us, "I welcome the prompt and effective resolution of issues by staff when my family member is unwell."

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

- •The building had appropriate communal spaces for people to spend time in as well as their own rooms. A kitchen area was available to support people to develop independent cooking skills.
- •The provider had invested in the environment since the last inspection and they had a schedule of work due for completion over each financial year to continue to maintain and upgrade all areas. People told us they had chosen their own decorating and carpets for their own rooms.

Staff skills, knowledge and experience.

- •Staff were competent, knowledgeable and skilled; and carried out their roles effectively.
- •Staff had completed a comprehensive induction and training programme. They had opportunity for supervision and appraisal.
- •The registered manager had good systems to understand which staff needed their training to be refreshed and who required supervision.
- •Care workers told us they looked forwards to developing their knowledge and were supported to develop their qualifications.

Supporting people to eat and drink enough with choice in a balanced diet.

- •Staff supported people with their menu planning, shopping and meal preparation. This was carried out in a way which ensured the person developed or used their skills to become or maintain independence and confidence.
- •Staff worked to offer healthy choices or foods which would support people to maintain good health where they had specific medical needs. People did not always follow advice given but staff respected people's right to make their own decisions. People were however monitored to ensure they were safe.
- •One person had been working with staff to improve their fitness and weight. They had had some success and this had motivated them to continue.

Working with other agencies to ensure consistent care for people; supporting people to live healthier lives, access to healthcare services and support.

- •Where people required support from healthcare professionals this was arranged and staff followed guidance provided by such professionals. People had received support to maintain their health with regular access to GP's, dentists and other services. People also received an annual health check as per best practice for people with a learning disability.
- •Information was recorded ready to be shared with other agencies if people needed to access other services such as hospitals.
- •Staff supported people to access appointments and manage their anxiety, and prevent failure to attend. Staff had provided advice and guidance alongside encouragement to one person who had successfully visited the dentist. Their relative told us, "Staff are phenomenally committed to good care. My family member is the best they have been for many years."

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 with appropriate legal authority. 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- •Staff ensured that people were involved in decisions about their care; and knew what they needed to do to make sure decisions were taken in people's best interests.
- •Where people did not have capacity to make decisions, they were supported to have maximum choice and control of their lives.
- •Lots of work had been done where specific decisions were needed and staff wanted to know if people had the capacity to understand, for example the piece of work around smoking in the building against the law, also to support one person to understand if they wished to move on. This demonstrated best practice was used.
- •Where required appropriate applications had been made to deprive people of the liberty within the law.



## Is the service caring?

## Our findings

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

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported respecting and promoting people's privacy and dignity.

•We observed people were treated with kindness and were positive about the staff's caring attitude. We received feedback from people and relatives which supported this. People said, "This is the best place I've been in. I feel cared for by all the staff and some of the residents" and "The staff are kind and caring, and the agency staff." A relative told us about staff confidence with people, they said, "Interactions have improved since [Name of registered manager] arrived."

- •Staff spent time to get to know people's preferences and used this knowledge to care for them in the way they liked. A member of staff told us, "One person has really opened up in the past year and started to tell us how they want to be supported. This is because we have developed a good relationship with them."
- •Where people were unable to express their needs and choices, staff understood their way of communicating. Staff observed body language, eye contact and simple sign language to interpret what people needed.
- •Staff showed genuine concern for people and were keen to ensure people's rights were upheld and that they were not discriminated against in any way. A member of staff described how they had respected a person's personality and their introverted ways. This had created a challenge to staff when the person refused to engage with support. Through positive work they celebrated that the person no longer refused support and was eager to work alongside staff. We observed this when the person worked with staff around the cleanliness of their room. Their relative told us, "My family member now takes a bit more pride in themselves and I feel this is because staff treat them with respect."
- •People's right to privacy and confidentiality was respected.

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

- •Staff supported people to make decisions about their care; and knew when people wanted help and support from their relatives. Where needed, they sought external professional help to support decision making for people such as advocacy.
- •Good relationships had been fostered between people and their link worker. People told us they trusted their link worker. In the recent survey of people's views one person fed back, 'I have good chats and I am on the same level as my link worker'.

#### Independence.

- •People were supported to maintain and develop relationships with those close to them, social networks and the community.
- •People were supported to focus on their independence in all areas of their lives including in their ideas and choices and this meant people enjoyed freedom and control of their life. People were prompted and reminded of their responsibilities with regards to housework and living together and this supported

harmonious shared living.

•Where people had suffered physical or mental ill health staff focused on rehabilitation and independence with them. For one person this meant they had been supported to improve their mobility to access their upstairs bedroom.



## Is the service responsive?

## Our findings

Responsive – this means that services met people's needs.

People's needs were met through good organisation and delivery.

Personalised care including end of life care and support.

- •Staff knew people's likes, dislikes and preferences. They used this detail to care for people in the way they wanted. Staff had an excellent understanding of people's needs and could make suggestions to people around how they could develop their skills and independence. For example; one person felt their achievement was, "I feel confident I can do small tasks, I also go gardening one day per week." Another person reported their achievements were, "I am more confident cooking my own meals. I am a lot fitter and not so much anxiety now." The registered manager told us people were very proud of their achievements in the past year.
- •People were empowered to make choices and have as much control and independence as possible, including in developing care, support and goal plans. Relatives were also involved where they chose to be and where people wanted that. A visiting professional understood the culture the registered manager promoted around this and told us, "What the manager is aspiring to do is good."
- •Staff understood people's needs, were aware of good practice and guidance in end of life care, and respected people's religious beliefs and preferences. Staff had recently supported one person to understand their relative's decline in health and eventual death. Staffs' successful intervention meant the person did not suffer a decline in their mental health during this period of bereavement.
- •People's needs were identified, including those related to protected equality characteristics, and their choices and preferences were regularly met and reviewed. For example, reasonable adjustments were made where appropriate; and the service identified, recorded, shared and met the information and communication needs of people with a disability or sensory loss, as required by the Accessible Information Standard. All relevant polices were available in audio and easy read to enable people to understand their rights and how to raise concerns.
- •Staff supported people to develop and maintain friendships and relationships with relatives and loved ones. People had been supported to understand and develop relationships with their chosen partner. A relative told us, "Sunningdale have been quite marvellous with supporting my family member's relationship with their partner. I feel the calm environment helps residents feel secure." One person told us they were looking forwards to visiting relatives at Christmas, another person had invited a parent for Christmas dinner and had bought a board game for everyone to play. A relative told us, "I had Christmas lunch at Sunningdale last year and had a lovely time."
- •People had access to the community independently or with staff support. People accessed local clubs and venues based on their preferences. People enjoyed this freedom and opportunity to make friends and spend time with them. The staff had also organised day trips to the seaside following people's feedback. Everyone told us they enjoyed these and would like more to happen.
- •Activities in the service were not formally organised each day and people told us they felt bored at times. The registered manager agreed to focus on this with people and use their monthly reviews to monitor progress.

Improving care quality in response to complaints or concerns.

- •People knew how to provide feedback to the management team about their experiences of care and the service provided a range of accessible ways to do this.
- •People and relatives knew how to make complaints should they need to. They told us they believed they would be listened to. The registered manager acted upon complaints in an open and transparent way. They used any complaints received as an opportunity to improve the service.
- •A social worker had recently complimented the service in writing by saying, 'It was clear from recent reviews that things continue to improve for [Name of person] which seems to be as a result of an improved whole team, consistent approach to support. I would like to add that coming to Sunningdale as a visitor is an improved experience for me. Staff appear more responsive and informed and the home is more inviting."



## Is the service well-led?

## Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, personcentred care; supported learning and innovation; and promoted an open, fair culture.

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements; Continuous learning and improving care.

At the last inspection in October 2017 the provider breached regulations relating to good governance. During this inspection we found improvements had been made and the provider was no longer in breach of regulations.

- •The provider and registered manager demonstrated a commitment to ensuring the service was safe and high quality.
- •Regular checks were completed by the staff, registered manager and provider to make sure people were safe and that they were happy with the service they received.
- •The registered manager had ensured they had communicated all relevant incidents or concerns both internally to the provider and externally to the local authority or CQC as required by law.
- •All the feedback received was used to continuously improve the service.

Leadership by the provider of person-centred, high-quality care; Engaging and involving people using the service, the public and staff.

- •Leaders and managers demonstrated a commitment to provide person-centred, high-quality care by engaging with everyone using the service, staff and stakeholders.
- •Through this engagement in the past year the registered manager had developed a skilled workforce and empowered people and staff to speak up freely, raise concerns and discuss ideas. The leadership of the service has led to an improved rating at this inspection and better outcomes for the people supported at the service. A member of staff told us, "In the past year it has been good to see the improvements. [Name of registered manager] cares and wants everyone to be as safe as possible, but also to be reasonable. They will always help you if needed and has great ideas." The positive leadership skills displayed by the registered manager had led to them winning 'Inspirational manager of the year' at the provider's award ceremony.
- •People had completed a survey of their views and they met frequently to discuss the service they received. The feedback had been used to continuously improve the service.
- •Staff told us they felt listened to and that the registered manager was approachable. Staff understood their vision for the service and they told us they worked as a team to deliver high standards. One member of staff told us, "I enjoy feeling part of the team, I feel appreciated, supported and well led."

Working in partnership with others.

•The service had good links with the local community and key organisations, reflecting the needs and

preferences of people in its care. Also, to aid service development. For one person this had led to the local supermarket feeling concerned and contacting the service to seek help for a person. This demonstrated successful community presence which worked to safeguard people.	