

Sanctuary Home Care Limited

# Sanctuary Supported Living (Greenwich Care Services)

## 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

About the service: Sanctuary Supported Living (Greenwich Care Services) provides outreach, recovery and rehabilitation support for people with complex mental health needs living in the community. At the time of this inspection 40 people were using the service.

People's experience of using this service:

- People were complimentary about the service. They said they felt safe and their needs were being met.
- Care and support was personalised to individual needs to promote recovery.
- Assessments were carried out to ensure people's needs could be met. Where risks were identified, management plans were in place to manage these safely.
- Medicines were managed safely and staff followed appropriate infection control practices to prevent the spread of infections.
- Appropriate numbers of suitably skills staff were available to support people's needs.
- Staff had the knowledge and experience to support people's needs. They were supported through induction, training and supervision to ensure they performed their role effectively.
- People were supported to maintain good health and had access healthcare services.
- People were encouraged to eat healthy food for their wellbeing.
- 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.
- People's privacy, dignity and independence was promoted.
- Staff understood the Equality Act and supported people in a caring way.
- People were supported to participate in activities of interest that supported their recovery.
- There were effective systems in place to assess and monitor the quality of the service provided.
- Feedback from people, staff and professionals were taken into consideration and acted upon.
- The service had worked with key organisations to plan and deliver an effective service.

Rating at last inspection: Good (Report published on 5 July 2016)

Why we inspected: This was a planned inspection based on the rating at the last inspection. We found the service continues to meet the characteristics of Good in all areas.

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?

The service was safe

Details are in our Safe findings below.

Good ●

### Is the service effective?

The service was effective

Details are in our Effective findings below.

Good ●

### Is the service caring?

The service was caring

Details are in our Caring findings below.

Good ●

### Is the service responsive?

The service was responsive

Details are in our Responsive findings below.

Good ●

### Is the service well-led?

The service was well-led

Details are in our Well-Led findings below.

Good ●

# Sanctuary Supported Living (Greenwich Care Services)

## **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:** This inspection was completed by an inspector and an 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:** Sanctuary Supported Living (Greenwich Care Services) provides care and support to people living in five separate 'supported living' settings, so they can live as independently as possible.

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 site visit took place on 17 December 2018 and was announced. We gave the service 5 days' notice of the inspection site visit because we needed to be sure people using the service would be available to speak with us, either in person or on the telephone.

The inspection site activity started and ended on 17 December 2018. We visited the office location which was on the same premises as the block of flats used for one of the supported living schemes.

#### What we did:

Before the 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 accident and incidents. The provider completed a provider information return. This is 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 sought feedback from the local authorities who commission services from the provider and professionals who work with the service. We used all this information to plan our inspection.

During our inspection we spoke with four people to gather their views about the service. We spoke with four staff including the registered manager, assistant manager and two project workers.

We reviewed a range of records. This included five care plans, risk assessment and medicines records. Four staff files including recruitment, training and supervision records. We also reviewed records used in managing the service including policies and procedures, audits, minutes of meetings and surveys.

# 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.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding systems and all staff had completed safeguarding training. Staff knew of the types of abuse and what to look out for. They told us they would report any concerns of abuse to their manager.
- Where there were concerns of abuse the registered manager had notified the local authority, CQC and the police (where necessary).
- People told us they felt safe from harm and discrimination. One person said, "I feel safe here and I am happy here too."

Assessing risk, safety monitoring and management

- Risks to people had been identified and assessed and appropriate management plans were in place.
- Risk management plans had clear guidance for staff on how to keep people safe in areas including self-harm, medicines, physical health and substance misuse.
- Staff understood where people required support to reduce the risk of avoidable harm.
- Where required healthcare professionals including the Greenwich mental health services had been involved in assessing risk and supporting staff on how to manage risk safely.

Staffing levels and recruitment

- The provider had appropriate numbers of staff to support people's needs. The registered manager informed us staffing levels were planned based on people's needs. They said that where additional staff support was required, for example, for health appointments, the staffing numbers were increased to ensure people's needs were met.
- The numbers of staff on shift matched the numbers planned for on the rota. Staff we spoke with told us the staffing numbers in place were appropriate and met people's needs.
- Where additional staff were required to cover shifts, the provider's internal bank staff, regular agency or permanent staff were offered extra shifts to promote consistency in the support people received.
- During our inspection, we were informed and we observed that people were independent of their needs including personal care, meal preparation and accessing the community. Staff told us they prompted people in areas where they required support. They told us that the aim of the service was to successfully move people onto independent living.
- The provider followed safe recruitment practices and had ensured appropriate checks were completed before staff were employed.

Using medicines safely

- Medicines were safely acquired, stored, administered and disposed of safely where people refused to take

their medicines or no longer required them.

- All staff had completed medicines training and their competencies had been checked to ensure they had the knowledge and skills to support people safely. Staff told us they felt confident to support people with their medicines.
- Where people were supported with their medicines, a medicines administration record (MAR) was completed accordingly. We checked medicines stock against information in the MAR and this matched each other.
- People were encouraged to administer their own medicines independently where appropriate risk assessments had been carried out and the service had ensured medicines could be stored safely in individual flats.
- Health professionals reviewed people's medicines regularly to ensure they were effective for their recovery.

#### Preventing and controlling infection

- The service managed the control and prevention of infection well. They had policies and procedures in place which provided staff with guidance.
- Staff had completed infection control and food hygiene training and followed safe infection control practices. Staff told us they washed their hands regularly and wore personal protective equipment such as gloves when supporting people.
- People were also supported to understand and practice safe hygiene levels. Staff carried out weekly spot checks in individual flats, including fridge checks to ensure their food was safe and to help prevent the spread of infections.

#### Learning lessons when things go wrong

- Accidents and incidents were reported, recorded and monitored appropriately to drive improvements.
- When things went wrong, the registered manager responded appropriately and used this as learning opportunities. For example, the provider had experienced some antisocial behaviour which triggered the fire alarm system regularly. The fire brigade supported the service and trained both people and staff on fire safety which had significantly reduced the number of incidents.



# 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

- The service aimed to obtain as much information as possible about a person before supporting them. The service mostly received referral information from care coordinators or commissioners detailing the support a person required.
- A specialist project worker or the deputy manager would visit the person either in the hospital, their home or in another health or social care service to assess their needs. The person would be invited into the service to also assess if the accommodation and support available was suitable.
- During these assessments, people's family, friends, key workers, care coordinators or social workers were involved to ensure appropriate information was acquired to develop care and risk management plans.
- Staff knew of best practice guidelines and supported people to achieve good recovery outcomes.

Staff skills, knowledge and experience

- All new staff had completed a comprehensive induction before they started working at the service.
- Staff training, supervision and appraisals had all been completed in line with the provider's requirements. A staff member commented, "I get supervision every month. Supervision is interesting and we have the opportunity to discuss any matters of importance including training and it has always been helpful."
- Staff told us they felt supported in their role and were given opportunities to acquire new skills and develop professionally. A staff member said, "It is really good working here because the company is supportive and encourage progress."
- People told us that staff had the knowledge and skills to provide them with the support they required. One person said, "The staff are very good and very helpful with [my mental health condition], they pick-up signs and call the ambulance service and they have taken me to hospital too. They also check on me every day."

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

- Everyone using the service was independent in buying and cooking their own meals.
- Where people were at risk of malnutrition or self-neglect, staff knew the signs to look out for and told us of the additional support they provided such as ensuring the individual had access to enough food and drink.
- People were encouraged and educated to make healthy meal choices and were supported to cook healthy meals through the service's cookery class. For example, about eating less sugary and fatty foods and more fruits and vegetables.
- The service had a 'world food' programme where people had identified different food cuisines they were interested in and were supported to learn how to cook these meals.

Supporting people to live healthier lives, access healthcare services and support: Staff providing consistent,

effective, timely care within and across organisations

- People had access to healthcare services and had been treated by various healthcare professionals including GPs, dentists, occupational therapists and psychiatrists.
- The service worked in partnership with health and social care professionals to ensure people received effective care and support. For example, the service was working with a specialist psychologist to educate and update staff knowledge on mental health management including areas such as hearing voices.
- Where required, information was shared with other agencies such as social services, mental health teams, hospitals and the police.
- Feedback we received from health and social care professionals was positive. They told us that staff were proactive in contacting them if they had any concerns and had followed any guidance provided.

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. We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had the appropriate legal authority and were being met.

- People's rights were protected because staff sought their consent before supporting them.
- Both the registered manager and staff were knowledgeable and worked within the requirements of MCA. They told us people could make decisions for themselves, therefore there had not been any need to carry out mental capacity assessments or best interest decisions. There had also not been any applications for authorisations for DoLS. People we spoke with told us that they could make decisions for themselves and they had not experienced any restrictions or restrains.

## 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

- People were supported by staff that were kind, respectful and caring towards them. One person said, "I am happy to live here and I have support here. If I have a problem I can always go to them [staff]." Another person said, "The staff are good to me, they are very professional."
- We observed that people appeared relaxed when interacting with staff. Staff also respected people and called them by their preferred names and/or titles.
- People's support plans included their preferences, likes and dislikes and staff we spoke with knew how individuals wanted to be treated.

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

- People had been consulted about their support needs and were involved in making decisions about the level of support they required. Records we reviewed showed that people's support plans were developed with them and they had signed to show they were involved in planning their recovery plans.
- Monthly key worker sessions gave people opportunities to express their views about the support provided. A key worker is a named staff member responsible for coordinating a person's care and providing regular reports on their needs and progress.
- Monthly residents' meetings were chaired by people to gather their feedback about the service and to drive improvement in areas including smoking, cleaning and to address any issues of concern to either people or staff. Where matters of high importance required addressing, care coordinators were invited to these meetings to provide their professional input.
- People were provided with appropriate information and where required, other professionals were contacted to support people to make informed decisions for themselves.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected; their rights were upheld and they were not discriminated against. One person said, "Staff are kind to me and respect me."
- Staff treated people with dignity and respect. A staff member told us, "We always knock on people's doors and we inform them of the reason why we are knocking for them to engage with us." Another staff said, "We will always ask them how they would like to be supported."
- People were independent in their day-to-day activities and could access the local community, prepare their own meals and clean their own flats. However, where people required support, this was provided.
- Information was kept securely. People's records were kept in a locked office to ensure only authorised staff had access to them. Computers were password protected, and information was shared on need to know basis and only sent securely to health and social care professionals.

# 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

- Each person had a support plan in place which provided staff with guidance on how they should be supported. Care plans included people's medical conditions, likes and dislikes and the level of support they required.
- People had as much control and independence as possible and were included in developing their support plans. Relatives were also involved where they chose to be and where people wanted that.
- Staff knew people well and told us of signs they looked out for to identify someone's mental health was declining, such as being withdrawn or self-neglect.
- People were supported to achieve good outcomes and to access services including smoking cessation, substance misuse and no-alcohol to support their recovery.
- Staff understood people's diversities in relation to their race, disability, sexuality, sexual orientation, religion and cultural backgrounds. People were supported to practice their faith, and engage in relationships of their choice without any discrimination.
- People were supported to maintain relationships with their family and friends where this promoted their recovery.
- People were supported to engage in activities that stimulated them. This included supporting people to gain voluntary work and apprenticeships. People were also involved in organising Halloween and barbeque parties, weekly coffee mornings, relaxation sessions, swimming, gardening, meals out, cinema, museums, and other leisure activities. There was also a home library for people to access books and digital versatile disc (DVDs). We saw that the service encouraged people to build their skills and confidence by leading on projects such as art and French lessons and cookery classes.

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

- The provider had an effective system in place to handle complaints. The service had a complaints policy and procedure which provided guidance on how to raise a concern or complaint and the time timescales for responding.
- The service had not received any complaints since our last inspection. The registered manager told us they would address all complaints and concerns by following their complaints policy and they would use any lessons learnt to improve on the quality of the service.

### End of life care and support

- No one using the service required end of life support. The registered manager informed us that where required they would work with people, their relatives where applicable and other professionals to ensure the person experienced a comfortable, dignified and pain-free death and their end of life wishes respected.

# Is the service well-led?

## Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred 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.

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- The management team demonstrated a commitment to provide meaningful, high quality and person-centred care that met people's needs in a timely way.
- The management team empowered people to make decisions about their support needs and had acted on feedback provided to improve the quality of the service.
- The management team and staff consistently monitored and reviewed each person's progress to ensure their needs were being met.
- The management team and staff encouraged, motivated and supported people to achieve good outcomes and move onto independent living.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The registered manager knew of their responsibility under the Health and Social Care Act 2014 and had notified CQC of any significant events at their service. The registered manager was keen to work with other professionals and sought their support where required.
- There was an organisational structure and staff understood their individual roles and told us that they felt supported in their roles and were given opportunities to develop and progress professionally.
- The provider had an effective out of hours system known as the 'Sanctuary 365' which provided staff with additional support where required.
- The service had an effective system in place to assess and monitor the quality of the service provided. Daily, weekly, monthly, quarterly and annual monitoring checks were carried out in areas including medicines, health and safety, support plans and staff records. Any issues identified were followed up promptly to improve the quality of the service.

Continuous learning and improving care

- The service encouraged continuous learning for both people and staff. Other agencies including health and social care professionals were consistently contacted to educate and support both people and staff.
- Information gathered from monitoring checks, accidents and incidents and safeguarding adults was used to develop the service and make improvements where required.

Engaging and involving people using the service, the public and staff

- People's views were sought through monthly residents' meetings and people were given the chance to feedback on the service they received.

- People also completed an annual satisfaction survey for the year 2018/2019 and the results showed that the serviced achieved 100% in all areas looked at. This included areas such as care and support, communication and information, quality of life, safety and security, and staff competence and knowledge.
- Monthly staff meetings gave staff the opportunity to feedback on the service. Meeting minutes showed topics discussed included health and safety, training and development, and activities. We saw that staff used this opportunity to share best practice and positive outcomes of recovery.
- People and staff told us that there was a positive and open culture at the service and the provider took their feedback seriously and acted on it.

#### Working in partnership with others

- The service worked in partnership with key organisations, including the local authority and health and social care professionals to provide joined-up care. The service had also worked in partnership with the fire brigade and the local police to educate and support people and staff with fire safety and health and safety procedures.
- The service had good links with other resources and organisations such as MIND in the local community to support people's recovery.
- Feedback we received from the service commissioner was positive. They told us that staff engaged well with commissioners and other providers and have worked well to deliver a quality supported living service.