

Sanctuary Home Care Limited

Sanctuary Supported Living (Hazel 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 ●

Summary of findings

Overall summary

We undertook an announced inspection on 16 and 17 February 2017. We gave the provider 48 hours' notice of our intention to undertake an inspection. This was because the organisation provides a supported living service to people in their homes. We needed to be sure that someone would be available at the office.

This service provides care and support to people living in 'supported living' accommodation, so that they can live in their own home as independently as possible. People's care and housing are provided under separate agreements; this inspection looked at their personal care and support arrangements.

Sanctuary Supported Living (Hazel Court) provides support for adults with learning disabilities. At the time of our inspection the service was supporting five people with personal care and support.

There was a registered manager for this service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered providers and registered managers 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 we spoke with said they had support from regular staff who helped them feel safe. Staff we spoke with recognised the different types of abuse. There were systems in place to guide staff in reporting any concerns. Staff were knowledgeable about how to manage people's individual risks, and were able to respond to people's needs. People were supported with their medicines in a way that encouraged their independence as much as possible. Staff were trained and had their competency checked by the management team. They knew about the risks associated with medicines.

Staff had up to date knowledge and training to support people. Staff always ensured people gave their consent to the support they received. The management team regularly reviewed how people were supported to make decisions. People explained they were supported to make their own decisions and be as independent as they could. They told us they were supported with meal planning and cooking. Staff told us they encouraged people to follow a healthy diet. People and their relatives told us staff would access health professionals as soon as they were needed.

People and their relatives said staff and management team were caring and kind. They said people were treated with dignity and respect, and encouraged to be as independent as possible. People said they were involved in making choices about what they were supported with and staff knew their preferences. Relatives told us they were involved as part of the team to support their family member. Staff were adaptable to changes in people's needs and communicated changes to the rest of the team effectively.

People and their relatives knew how to raise complaints and the management team had arrangements in place to ensure people were listened to and appropriate action taken. Staff were involved in regular meetings to share their views and concerns about the quality of the service. People and staff said the

management team were accessible and supportive to them.

The management team monitored the quality of the service in an inclusive way. They ensured there was a culture of openness with people living at the scheme and staff. The management team had systems in place to identify improvements and were taking appropriate steps to ensure these were made. The management team worked with other agencies to ensure holistic support was provided for people living at the scheme.

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 benefitted with support from regular staff that knew their needs and managed their identified risks in a safe way. People received the level of support they needed to ensure they had their medicines as prescribed.

Is the service effective?

Good ●

The service was effective

People were supported by staff that had the skills to meet their needs. People received support from staff that respected people's rights to make their own decisions as independently as possible. People were supported to access health care when they needed to.

Is the service caring?

Good ●

The service was caring

People benefitted from caring support from a staff team that listened to their views. Staff knew people's wishes and preferences and they listened to them. Staff respected peoples' dignity and worked with people to achieve as much independence as possible.

Is the service responsive?

Good ●

The service was responsive

People were involved in how they were supported by staff who listened and were adaptable to their needs. People benefitted from regular reviews of how they were supported. People and their relatives were confident that any concerns they raised would be responded to appropriately.

Is the service well-led?

Good ●

The service was well-led.

People, relatives and staff felt supported by the management

team. The culture of the service was inclusive, with the focus on each person as an individual and involving them with all aspects of their care. The management team had systems in place to monitor the quality of the support provided.

Sanctuary Supported Living (Hazel 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 was an announced inspection which took place on 16 and 17 February by one inspector. The provider was given 48 hours' notice because the organisation provides a domiciliary care service and we needed to be sure that someone would be available.

This inspection used the standard CQC assessment and ratings framework for community adult social care services, but included testing some new and improved methods for inspecting adult social care community services. The new and improved methods are designed to involve people more in the inspection, and to better reflect their experiences of the service. For this inspection we used a focus group of people living at the scheme arranged by the provider. This gave people a chance to meet with the inspector and express their views of the service.

We looked at the information we held about the provider and this service, such as incidents, injuries to people receiving care, this also included any incidents of abuse. We refer to these as notifications and providers are required to notify the Care Quality Commission about these events. We asked the local authority if they had any information to share with us about the services provided at the agency. The local authority are responsible for monitoring the quality and funding for people who use the service.

We spoke with eight people, and three relatives. We spoke with seven staff and the registered manager. We looked at the care records for five people including medicine records, and meeting minutes for people living at the scheme and staff. We also look at the system in place for monitoring the quality of the service, such as audits and inspections completed by the management team and the provider.

Is the service safe?

Our findings

People we spoke with said they felt safe because they were supported by staff they knew well and were comfortable with. One person told us they had confidence in all the staff, which helped them feel safe. Another person explained how they felt much safer living at this scheme, because there were always staff around to help them. Relatives we spoke with said their family member was safe and well looked after by staff. One relative said, "They (staff) keep everyone safe and happy."

The registered manager and staff explained their responsibilities to identify and report potential abuse under the local authority reporting procedures. All the staff we spoke with had a clear understanding to report any concerns and who they could report them to. They told us training on potential abuse formed part of their induction and the training was regularly updated. The provider had systems in place to support staff to report any concerns, staff we spoke with said they were aware of these systems and would use them if they needed to.

People told us they regularly discussed their support needs with staff. This included identified risks to their safety and welfare. For example, the registered manager explained how she risk assessed accessing the community to ensure people were supported to remain as independent as possible. One person told us they needed support with accessing the community and it was clearly documented on their care plan with a risk assessment to ensure the risks were mitigated. Staff we spoke with said they kept up to date with people's care plans and risk assessments so they were aware of what support the person needed.

People told us there were enough staff. One person said about staff, "They are always about if you need them." Staff said they had enough staff to meet people's health and social care needs. The registered manager explained how she monitored staffing levels to ensure people's needs could be met.

People told us they were supported by the staff team who knew them well. Staff told us they had met people as part of their recruitment process. They told us there was a core established staff group who provided continuity for people using the service and supported new staff. They knew how important it was to people that they knew the staff supporting them.

Staff told us they completed application forms and were interviewed to check their suitability before they were employed. Interviews included people they would be supporting as well as the management team. The registered manager checked with staff members' previous employers and with the Disclosure and Barring Service (DBS). The DBS is a national service that keeps records of criminal convictions. This information supported the registered manager to ensure suitable people were employed, so people using the service were not placed at risk through their recruitment practices.

Some people needed support with their medicines. The registered manager told us this was discussed with people living at the scheme and they were included in decisions about how they were supported. People were supported to be as independent as possible and manage their medicines with the least intervention possible. For example, one person explained how they managed their own medicines and were only

supported when they needed it. They said this improved their feeling of self-worth and independence. We saw people's medication plans guided staff with the level of support each person needed. Staff told us these plans were updated when needed and they were aware of any changes. They said they had received training about administering medicines and their competency was assessed by the management team. The registered manager told us people's medicine records were reviewed by staff and the management team to ensure that they were completed correctly and people received their medicines as prescribed.

Is the service effective?

Our findings

People we spoke with told us staff were knowledgeable about how to support them. One person told us about staff, "They all really know what they are doing." Relatives we spoke with said staff were well trained and knew how to support people living at the scheme. One relative told us, "Staff have a good knowledge base, and the team as a whole are really getting to know the subtle skills needed to support my [family member]."

Staff told us that they had received an induction before working independently with people. This included training, reading people's care plans, as well as shadowing with experienced staff. Staff said they met the people living at the scheme and had experienced staff share their best practice with them so people were supported effectively. One new member of staff explained how they regularly had feedback from the management team and their colleagues which increased their confidence with supporting people.

Staff said they had received training in all areas of care delivery. One member of staff explained they had attended training about professional boundaries. They told us this ensured all the staff were consistent when supporting people and had improved their practice and confidence. Staff said they were well supported and were encouraged to complete training to improve their skills on a regular basis. This training included Mental Capacity Act 2005 (MCA); staff had a good understanding of what this meant for people they supported. One staff member said, "We all encourage people to make their own choices and decisions every day."

The 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 told us staff always checked for their consent before supporting them. Staff we spoke with said they were aware of a person's right to refuse their support and they explained how they would manage this when they needed to. They always ensured people were in agreement with any support they provided. Staff were aware of who needed support with decision making and who would be included in any best interest decisions for people. The registered manager had a good understanding of the MCA and was aware of her responsibility to ensure decisions were made within this legislation. For example, we saw best interests meeting had been arranged for one person involving their relative and social worker to review a particular decision. We spoke with their relative and they explained how they were involved with ensuring the decision was made in the person's best interests.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. We checked whether the service was working within the principles of the MCA. Any applications to deprive someone of their liberty for this service must be made through the Court of Protection. The registered manager had worked with the Court of Protection when they needed to. They were aware of this legislation and were happy to seek advice when required.

Some people we spoke with had help with shopping, cooking and meal preparation as part of their support needs. They told us they were offered choice and encouraged to maintain a healthy diet. One person explained how they met weekly with staff to choose their menu and agree their shopping list. They went on to say how staff listened to them and they had meals they enjoyed whilst encouraging them to make healthy choices. Relatives we spoke with said their family member was encouraged to be as independent as possible with their meals, from shopping, preparation and cooking. One relative explained how staff were supporting their family member to eat healthily as much as possible. Staff knew people well and were aware of what level of support each person needed. One member of staff explained how one person living at the scheme had improved with their own cooking and they were now able to cook for themselves with just some prompts to follow.

People we spoke with said staff helped them if they needed support for any aspect of their health care. For example, with visiting their GP's and opticians when they needed to. Relatives told us they worked with staff to support their family member to attend health care appointments when they needed to. One relative explained how there was a plan in place to support their family member to ensure they had the health interventions they needed. Staff had involved other health agencies as they were needed in response to the person's needs. For example, we saw staff had involved the occupational therapist for one person who required additional equipment.

Is the service caring?

Our findings

People told us the staff and management team were caring and spent time listening to them. One person said about the staff, "They are all nice, and listen to me." Another person told us, "This is the best place I have lived at, I love being independent." A further person said, "I get on well with all the staff." Relatives said staff were kind and considerate. One relative said, "All the staff are brilliant, it's really brilliant here."

People said staff supported them to make their own decisions about their daily lives. One person told us, "We talk about everything, and I decide what I want help with." Another person explained how they were working with the registered manager to agree their updated care plan to ensure what they wanted was captured to inform staff. Relatives said they were involved with their family member's support. One relative explained how they felt part of a team and worked with staff and their family member to improve their family member's well-being and independence. People we spoke with said they were confident with staff who supported them. Through-out the inspection we saw many interactions between staff and people living at the scheme. We saw people were relaxed and comfortable with staff and the registered manager.

We saw staff gave people as much choice and control over their lives as possible. Staff assumed people had the ability to make their own decisions about their daily lives and gave people choices in a way they could understand. They also gave people the time to express their wishes and respected the decisions they made. Staff we spoke with explained how important it was that people who used the service were listened to and had influence over how their care was provided. One member of staff explained they used different methods of communication to ensure people were able to understand them. They told us they used some sign language, pictures and symbols to support communication, and these were tailored for each individual. The registered manager told us they were reviewing communication plans to ensure all staff had a clear understanding about how best to communicate with each person. One relative explained how staff had changed their approach to their family member and how this had improved communication between them.

Staff were knowledgeable about the support people wanted and what was important to them in their lives. They were able to describe how different people liked to be supported and we saw people had their wishes respected. People who lived at the scheme confirmed staff knew the support they needed and their preferences about their care. One relative explained how the staff really listened to their family member and worked with their family member to achieve their chosen goals.

People we spoke with said they were supported to be as independent as possible. For example one person explained how they went shopping on their own and how much this meant to them. Another person said they enjoyed planning their meals and cooking food for themselves. Relatives told us their family member was encouraged to be as independent as they could be. One relative explained how their family member had improved their independence skills since living at the scheme.

People said staff respected their dignity. One person told us, "Everyone treats me with dignity." Another person explained how staff respected their dignity by always knocking on their door before they entered, which ensured they had the privacy they needed. Relatives said staff always treated them and their family

member with dignity and respect. One relative told us how staff knew their family member well and respected the choices they made.

Is the service responsive?

Our findings

People we spoke with told us about how their individual needs were met. One person explained how they enjoyed going to the gym and staff had supported them to achieve this. They said this supported their wellbeing. Another person told us, "I am happy here, they [staff] listen to what I want to do and we work it out together." People we spoke with told us they made any decisions about how they were supported.

Relatives we spoke with said they were happy with the support their family member received at the scheme. One relative told us "This is a very good service; they are making improvements all the time." Another relative explained how the communication between them and staff had "Moved forward," as the staff team had become more established. They went on to say staff knew their family member's preferences well and this improved the experience for their family member.

Staff knew about each person's needs, they said they knew people really well and from the beginning they were given all the information they needed to support people. They could describe what support people needed and we saw this was reflected in people's care plans along with people's choices and outcomes. We looked at care records and could see people's likes and dislikes were recorded for staff to be aware of. People we spoke with confirmed their individual needs were met. Where more complex needs were identified, staff were aware of how to support the person. The registered manager explained they were in the process of updating risk assessments and care plans. They had shared with people to ensure they agreed with the updates when they were completed.

People told us they were becoming more independent because of the support staff provided which improved their well-being. Relatives said their family members were learning new skills which increased their independence and quality of life. Staff and the registered manager explained how people had already achieved some goals and improved their independence.

People said they had interesting things to do which were individual to them. One person told us how they were supported to attend clubs and workshops and explained how much they enjoyed participating in them. All the people we spoke with said they had meetings with staff to agree what they were going to do. Relatives we spoke with said their family members were always busy and enjoyed their lives. One relative told us, "They support family member to attend work, which they really enjoy and adds to the quality of their life."

People told us their support was regularly reviewed and where changes were needed they were implemented. People we spoke with said they felt able to say if anything around the support they received needed changing or could be improved. Relatives said they could contact the management team at any time and they would listen and support them. For example, one relative said when they raised a particular concern they were listened to and the situation was resolved satisfactorily. Another relative told us, "They [staff] really listen and are growing as a service for the benefit of all the people living there." Staff told us that plans were updated quickly if there were any changes to people's needs.

Relatives we spoke with said they asked for feedback and they told us the registered manager was setting up meetings for families to attend to look at development ideas and fundraising. One relative told us they were looking forward to the meetings and being involved with service development.

The people we spoke with said they felt comfortable to raise any concerns, and knew who to speak to. One person said, "I can always talk to the manager, she listens." We saw there were clear notices available to aid communication about who to speak with to make a complaint. Relatives said they were confident to speak to the management team if they had any concerns. We saw the management team investigated any concerns raised and actioned them. For example, we saw one complaint had been investigated and a meeting held to discuss and agree the outcome. There were clear arrangements in place for recording complaints and any actions taken. Staff told us learning from complaints was shared with them.

Is the service well-led?

Our findings

People we spoke with said they were well supported and knew the management team well. They all said the management team were very approachable. Relatives we spoke with said they felt the service was well managed. They said they could speak with the management team at any time, and they would always take the appropriate action. One relative explained the scheme was adapting as it was becoming established and was already, "An excellent service."

Staff told us the management team often worked along-side them to get to know people and ensure they were supporting people effectively. The registered manager explained that by supporting people she had developed a relationship with them which would enable her to monitor the service effectively. Staff told us the culture of the service was about the importance of each person living at the scheme. All the staff we spoke with were passionate about supporting people with all their needs and being responsive and adaptable to people in how care was provided. One member of staff said, "I love working here, we work as a team and support people to feel valued." Staff said they communicated well and worked together to support people with the involvement of the person using the service and their families.

The registered manager explained the ethos of the provider was to ensure people who used the service were at the heart of the support they provided. For example, new staff we spoke with explained how people living at the scheme had been involved with their recruitment. A new member of staff explained how this inspired them from the beginning to see how important people living at the scheme were to the culture of the team they were joining.

Staff said they were supported by the management team. They told us they could always speak to someone if they had any concerns about anything. For example, one member of staff told us the registered manager was a, "Perfect manager, very approachable." Another member of staff said about the management team, "We do good team work and share information really well." A further member of staff said, "We are like a big family." Staff we spoke with said they were encouraged to express ideas and comments about improvements to the service. For example one member of staff said they would like a longer staff meeting to discuss best practice and share strategies about supporting people. The registered manager had included this on the agenda for their next team meeting.

The management team completed regular checks to ensure they provided quality care. The registered manager told us she had identified areas for improvement and was working on completing these. She had an improvement plan which identified what needed to be completed and who was responsible. For example there was a plan to review and update all the care plans for people, working with staff and people living at the scheme to put these in place. Other areas for improvement were completing regular meetings for people living at the scheme to ensure they were involved in development of the scheme and regular feedback. The registered manager was ensuring these were diarised in to ensure they were completed. We could see that the management team regularly reviewed their plan to ensure actions were completed.

The registered manager sought feedback from people living at the scheme about the quality of support

provided. We saw people completed questionnaires regularly and we saw the responses were positive. Where any concerns were raised these were actioned in a timely way. People told us and we saw people living at the home were regularly consulted about developing the service. For example we saw people were involved in decisions and ideas for future events at the scheme.

Staff told us they always reported accidents and incidents. They said they received training about completing documentation effectively. The management team investigated the accidents to ensure any actions needed were made in a timely way. The management team explained how they would review through a practice discussion with staff and resolve any on-going actions when needed. For example, one person had regular falls, the management team arranged support from other health care professionals which reduced the number of falls. The registered manager had an overview of the accidents and incidents to monitor trends to ensure improvements were made when needed.

People we spoke with told us this service worked in partnership with other agencies to provide their support. They said the services worked well together and they were happy with the arrangements. The registered manager and staff told us they had systems in place to ensure information was shared between the different agencies to ensure they supported people effectively. She went onto say how they involved the local authority and other agencies through regular meetings with the person and their relatives. These meetings ensured people's wishes and preferences were taken into account whilst a holistic approach was used about how people were supported.