

Sanctuary Home Care Limited

# Sanctuary Home Care Ltd - Ketley

## Inspection report

Rose Manor  
Ketley Park Road  
Telford  
Shropshire  
TF1 5FH

Tel: 01952259302

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17 January 2020

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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 Home Care Ltd - Ketley is a domiciliary care agency that provides personal care and support to people living in their own accommodation at Rose Manor. Rose Manor is a purpose built complex where people live in individual flats with shared facilities which include a gym, a hair salon, lounge and café.

Not everyone using Sanctuary Home Care Ltd - Ketley received a regulated activity. CQC only inspects the service received by people provided with 'personal care': for example, help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided. At the time of our inspection 14 people were receiving the regulated activity personal care.

### People's experience of using this service and what we found

People were supported by regular staff members who arrived when expected and stayed for the agreed amount of time.

Staff were aware of the risks to people and supported them in a way which minimised the potential for harm. Staff understood how to report concerns they had about people's safety.

Where people needed support, they were safely assisted with their medicines by staff who had been trained and assessed as competent. Staff followed effective infection prevention and control practice to help stop the spread of infection. The registered manager monitored and reported any safety incidents.

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

People's needs were assessed in line with best practice guidance and staff received training to meet those needs. When it was required people were supported or encouraged to eat, drink and manage a well-balanced diet. Staff supported people to access other healthcare facilities should they needed it.

People were supported by staff who they had built positive relationships with. People were afforded respect, dignity and privacy.

People's care was focused on them as an individual. Staff gave support to people to help prevent social isolation and encouraged them to be involved in activities, where they wanted to. People were confident to raise complaints.

The provider had systems in place to monitor the quality of care and support people received.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was good (report published 19 July 2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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 Home Care Ltd - Ketley

## **Detailed findings**

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

#### Inspection team

This inspection was completed by one inspector.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats as part of supported living arrangements.

People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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

We gave the service 48 hours' notice of the inspection visit because it is a domiciliary care provider and the registered manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

Inspection activity started and ended on 17 January 2020. During this time, we visited the office location to meet with people, see the registered manager and staff; and to review care records, policies and procedures.

### What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We asked the local authority and Healthwatch for any information they had which would aid our inspection. Local authorities together with other agencies may have responsibility for funding people who used the service and monitoring its quality. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

### During the inspection

We spoke with four people who used the service about their experience of the care provided and two relatives. We spoke with five members of staff including registered manager, area service manager and three care workers.

We reviewed a range of records. This included three people's care records and medication records. In addition, we viewed a variety of records relating to the management of the service, including policies, procedures and quality checks. We confirmed the safe recruitment of two staff members.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People continued to be safeguarded against the risk of abuse. Everyone we spoke with told us they felt safe receiving services from Sanctuary Home Care Ltd - Ketley.
- Staff told us they were confident to report any poor practices. Staff had received training in safeguarding adults at risk of abuse and knew how to raise a safeguarding alert. This helped to ensure people were safe.
- Information was available to people, staff and relatives on how to report any concerns.
- The provider had systems in place to make appropriate notifications to the local authority to keep people safe.

Assessing risk, safety monitoring and management

- All those we spoke with told us they felt safe when being supported by staff. One person told us they initially felt apprehensive about using a specific piece of mobility equipment. However, they went on to say, "Staff were so competent and confident it reassured me."
- The provider had assessments in place to identify risks to people. For example, where people needed support with their mobility this had been assessed along with their risk of falls. Staff followed guidance in care plans when supporting people to move around their homes safely.
- People had individual personal evacuation plans in place to direct staff members, or the emergency services, should an emergency occur. Staff members were aware of these plans and people were assured they would be supported appropriately at such times.

Staffing and recruitment

- People continued to be supported safely by staff who arrived when expected and stayed for the agreed amount of time.
- People told us they saw regular staff members who knew them well and supported them as they wished.
- Staff members were recruited safely.

Using medicines safely

- Not everyone we spoke with received support with their medicines. Those who did told us they continued to receive their medicines safely and when they needed them. Staff members had received training on how to safely support people and had been assessed as competent.
- Some people took some medicines only when they needed them, such as pain relief. Staff had access to guidance which directed them on how to safely support people. This included the maximum dose in 24 hours and the gaps to be observed in-between.
- The provider had systems in place to respond should a medicine error occur. This included contact with

healthcare professionals, investigation into any perceived error and, if needed, retraining of staff members.

#### Preventing and controlling infection

- Staff members told us they received training in infection prevention and control. For example, staff wore protective equipment, such as gloves, to help prevent any spread of infection.
- We saw staff following effective infection prevention and control practices.

#### Learning lessons when things go wrong

- The registered manager and area service manager looked at incidents which affected the safety of people. For example, they looked for any deterioration in a person's health or any potential incidents of poor staff practice. This helped to identify if anything else could be done differently to minimise potential future risk of harm to people.



# Is the service effective?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has now remained the same. This meant 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; Staff working with other agencies to provide consistent, effective, timely care

- People's physical, mental health and social needs had been holistically assessed in line with recognised best practice. This included, but was not limited to, oral health, diet and nutrition.
- People told us they were involved in decisions regarding their care and support.
- People's care plans reflected any diverse needs, including their religion, ethnicity, disabilities and important relationships. This helped staff to recognise and understand aspects of people's life which were important to them.

Staff support: induction, training, skills and experience

- People continued to be supported by staff who had the skills and knowledge to support them effectively. The registered manager monitored staff training to ensure staff had the skills and understanding to support people and any specific health needs. Staff members received specific training regarding people's individual health needs in order to effectively support them. For example, learning sessions had been provided for Huntington's and Parkinson's disease.
- Staff were supported in their roles. They told us they received regular support and meetings with the registered manager or another member of the management team. This gave them opportunities to discuss and review their practice and any areas for professional development.

Supporting people to eat and drink enough to maintain a balanced diet;

- Not everyone received support with their eating and drinking. Where they did we saw they were supported to eat and drink sufficient amounts to maintain good health. If staff or the registered manager identified concerns regarding people's diet and nutrition these were passed to the appropriate healthcare professionals for their support.

Supporting people to live healthier lives, access healthcare services and support

- People were supported to refer themselves to various healthcare services and professionals such as GP, district nurse, mental health teams, speech and language therapy. If they required assistance to do this the registered manager and staff supported them.
- People's care records contained information on how to meet people's healthcare needs which staff members knew and followed.

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

- People remained responsible for maintaining their own home environment. As part of the providers assessment process they made recommendations for adaptations which would assist people to remain in their own accommodation.

Staff working with other agencies to provide consistent, effective, timely care

- Staff members had effective, and efficient, communication systems in place. This helped to share appropriate information with those involved in the support of people.

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 when this is in their best interests and legally authorised under the MCA.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty.

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People were supported to have choice and control over their lives and staff supported them in the least restrictive way possible; the policies and systems supported this practice. When someone could not make decisions for themselves, the provider and staff knew what to do in order to protect the individual's rights.
- Staff understood their responsibilities to ensure they acted in people's best interests. People's care plans contained information about people's decision-making abilities and how staff could support them to make decisions.

# Is the service caring?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People told us they were treated with respect and staff were always kind to them. People told us they were comfortable in the presence of staff. People and relatives described staff as, "Really nice," "Kind" and "Lovely."
- Staff had developed positive and empowering relationships with people. One person said, "I don't know what I would do without them. They encourage me to get up every day and keep doing things. They generally just keep me going."
- All staff members talked about those they supported with fondness, compassion and genuine positive regard.

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

- People were involved in making decisions about their care. Staff made opportunities to spend time with people, they spoke and listened to them and respected their wishes and opinions. Everyone we spoke with told us they were fully involved in decisions about their care and support and these were consistently respected by staff.
- Some people were not able to express their views or be fully involved in making decisions about their care. Where appropriate, relatives or advocates were included in the decision-making process. An advocate is someone who can offer support to enable a person to express their views and concerns, access information and advice, explore choices and options and defend and promote their rights.

Respecting and promoting people's privacy, dignity and independence

- People's dignity was treated with importance and they were spoken to with respect. People told us staff always respected their privacy.
- People were supported to be as independent as they could be. One person described how the registered manager supported them to make changes to their physical environment, so they could retain their independence and continue to do things they enjoyed.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received care which was focused on them and responded to their current and changing needs. Staff knew people well, they knew about their life history, their preferences, hobbies and interests. One person said, "They (staff) know me so well. We have a chat about things and it's not just about the care. I think I am treated as an individual."
- People's care was reviewed regularly, and their care plans were updated to account for any changes in support. Staff members were knowledgeable about those they supported.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Not everyone we spoke with received support to follow their interests or take part in social activities. However, those living at Rose Manor could take part in a range of activities arranged in the communal areas. Staff members were aware of those at risk of social isolation and encouraged them to take part in social events.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's information and communication needs were identified and recorded in their care records. Staff had found out about people's communication needs so they could ensure they understood information given to them. We saw information was presented in a way people found accessible. Should they require a different format this was arranged. For example, in larger print, with picture prompts or a different language.

Improving care quality in response to complaints or concerns

- We saw information was available to people, in a format appropriate to their communication styles, on how to raise a complaint or a concern if they needed to do so.
- The provider had systems in place to record and investigate and to respond to any complaints raised with them.

End of life care and support

- People were supported to identify their wishes for their end-of-life care. This included wishes they had for

receiving future treatment or for being resuscitated. The registered manager worked along-side other healthcare professionals at such times to ensure people received the appropriate support in the right setting when it was needed.

# Is the service well-led?

## Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- A registered manager was in post and was present throughout this inspection. The registered manager and provider had appropriately submitted notifications to the Care Quality Commission. The provider is legally obliged to send us notifications of incidents, events or changes that happen to the service within a required timescale.
- We saw the last rated inspection was displayed in accordance with the law at Sanctuary Home Care Ltd – Ketley and on their website.
- The provider had systems in place to monitor the quality of care and support. This included regular checks of medicine management, care plans and complaints. Senior staff members completed regular 'Spot checks' with staff members. This was to ensure they were effectively and safely supporting people with their care. As part of these checks people, and relatives, were asked to comment on the care they received.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People, and relatives, told us they had a positive relationship with the management team who they found to be accessible and engaging. Everyone we spoke with was complementary about the management team and felt supported by them.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The Duty of Candour is a regulation which all providers must adhere to. Under the Duty of Candour, providers must be open and transparent, and it sets out specific guidelines' providers must follow if things go wrong with care and treatment.
- We saw the management team, and provider, had systems in place to investigate and feedback on any incidents, accidents or complaints.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People were involved in decisions about their care and support and were asked for their opinion. They were encouraged to provide feedback on the service they received. Following this we saw the provider completed a plan of action to address any issues raised with them. The provider gave feedback to people and relatives on suggestions made to them. For example, we saw a "You said, we did" notice board where

the outcomes of people suggestions were displayed.

- Staff members told us they found the management team supportive and their opinions were welcomed and valued.
- Staff members understood the policies and procedures that informed their practice including the whistleblowing policy. They were confident they would be supported by the management team and provider should they ever need to raise such a concern.

Continuous learning and improving care

- The registered manager told us that they kept themselves up to date with developments and best practice in health and social care to ensure people received positive outcomes. This included regular interactions with healthcare professionals and commissioners. Additionally, the registered manager was supported by an area service manager who advised and guided when needed.
- The provider had effective quality systems in place to monitor the quality of care provided. For example, as part of a recent quality check they identified a recording error regarding two staff members training dates. At this inspection we saw this had been rectified.

Working in partnership with others

- The management team had established and maintained good links with the local communities within which people lived. This included regular contact with local healthcare professionals which people benefited from. For example, GP practices and district nurse teams.