

Sunningdale Care Limited

Sunningdale Nursing Home

Inspection report

Town Street
Rawdon
Leeds
West Yorkshire
LS19 6PU

Tel: 01132505003

Date of inspection visit:
04 July 2017

Date of publication:
22 August 2017

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

Sunningdale Nursing Home is registered to provide accommodation for up to 35 people who require nursing or personal care. Care is provided on two floors and linked by a passenger lift. Bedrooms are single occupancy and there are well appointed communal areas for dining and relaxation. There is also a small patio area to the rear and a small courtyard to the front of the home for people to use. Car parking is available.

This inspection took place on 04 July 2017 and was unannounced. On the day of inspection 28 people lived in the home, almost all living with Dementia.

At the last comprehensive inspection on 05 August 2014 the registered provider met the requirements of the regulations of the Health and Social Care Act 2008 (Regulated Activities) 2014. The service was rated as good in all domains. During this inspection the overall rating of the service remained good.

Some people at Sunningdale had limited verbal communication and were unable to converse with us. However we spoke with seven people who lived at the home and observed staff interactions with people.

People told us staff were caring and helpful and they felt safe at Sunningdale Nursing home. They felt there were sufficient staff to care for them and said they did not have to wait long when they asked for assistance.

There were procedures in place to protect people from abuse and unsafe care. Staff were familiar with these and had received training in safeguarding adults. We saw risk assessments were in place which provided guidance for staff. These measures minimised risks to people.

Staff managed medicines safely. People told us they felt staff gave them their medicines correctly and when they needed them. We saw medicines were checked in, stored, given as prescribed and disposed of correctly.

Staff were recruited safely and given training to provide them with skills and knowledge to deliver safe care. Staff received regular support and supervision from senior staff.

People told us the home was always clean and tidy. Infection control practice was good. Records were available confirming the environment and equipment used complied with statutory requirements and was safe to use.

People were complimentary about the meals and told us they were given a choice of food and drinks.

We saw staff acted promptly to manage people's health care needs and made appropriate referrals to other professionals.

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.

Care plans were personalised detailing how people wished to be supported. People who received support or where appropriate their relatives or advocates were involved in making decisions about their care.

We observed staff interaction and support given to people during the inspection visit. We saw they were patient and considerate and were attentive to people's needs. A relative said, "We have been impressed to see the way all residents are treated."

People able to talk with us said they knew how to complain if they needed to. They said staff listened to any concerns and took action to deal with any issues.

People told us the registered manager and staff team were approachable and supportive and listened to their views. Staff sought the views of people they supported through informal discussions and satisfaction surveys.

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 remains good.

Is the service effective?

Good ●

The service remains good.

Is the service caring?

Good ●

The service remains good.

Is the service responsive?

Good ●

The service remains good.

Is the service well-led?

Good ●

The service remains good.

Sunningdale Nursing Home

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 04 July 2017 and was unannounced. The inspection team consisted of an adult social care inspector

Before our inspection we reviewed the information we held on the service. This included notifications we had received from the registered provider about incidents that affected the health, safety and welfare of people who lived at the home and previous inspection reports. We also checked to see if any information concerning the care and welfare of people living at the home had been received.

We spoke with a range of people about the service. They included seven people who lived at the home, three relatives, the providers, the registered manager, deputy manager and three members of staff on duty.

During our inspection we used a method called Short Observational Framework for Inspection (SOFI). This involved observing staff interactions with people in their care. SOFI is a specific way of observing care to help us understand the experience of people who could not talk with us.

We looked around the building to ensure it was clean, hygienic and a safe place for people to live. We looked at care and the medicine records of three people, staff rotas, recruitment and staff training records and records relating to the management of the home.

We also spoke with health care professionals, the commissioning department at the local authority and continuing care group. This helped us to gain a balanced overview of what people experienced while they lived at the home.

Is the service safe?

Our findings

People said they felt safe at Sunningdale Nursing Home. One person said, "I love it here. They look after me so well." Another person told us, "I feel as safe as houses." A relative told us, "I have never heard a cross word [from staff] and they aren't always aware we are here." A relative said in a note to staff, 'I could not have found a better place for [family member] – and I certainly looked at a lot!.'

Procedures were in place to protect people from abuse and unsafe care and staff were familiar with these. Staff were able to tell us how they would deal with a safeguarding issue to reduce risks for people. One member of staff said, "Yes I have had my safeguarding training. If I saw anything of concern I would report it straight away."

Risk assessments including for falls, moving and handling and behaviour that challenged were informative and provided guidance for staff. Where people had behaviour that challenged. There was guidance to help staff provide consistent responses. Emergencies, accidents or incidents were managed appropriately, evaluated for any lessons learnt and shared with the team.

Staff recruitment was carried out safely and staffing levels were sufficient to meet people's care and support needs. People were encouraged to join in social activities. One person told us, "There is always someone about if you need anything. You just have to ask. A relative said "Usually staff are in the lounges and happy to help." A member of staff said, "There are enough staff. We have time to sit and chat with and comfort residents."

People able to talk with us and relatives we spoke with said they were given medicines as prescribed. We observed staff giving people medicines and these were given safely and carefully. Medicines audits had been regularly carried out and action taken, if needed, to ensure safe management of medicines.

We looked around the home and found it was clean and hygienic. Staff used personal protective clothing such as disposable gloves and aprons and good infection control when carrying out personal care. This reduced the risk of cross infection. A relative told us, "It is always spotlessly clean here – absolutely lovely."

We saw records confirming gas appliances and electrical facilities and equipment complied with statutory requirements and were safe to use. Equipment had been serviced and maintained as required. A fire safety procedure, risk assessment and personal evacuation plans were in place, to assist in reducing the risk of fire in the home.

Is the service effective?

Our findings

People we spoke with told us the meals were good and they had a choice at mealtimes. One person told us after their meal, "That was lovely." Another person said, "I look forward to my dinner. It tastes good." A relative told us, "The food looks good, [Family member] always eats it and they are offered lots of drinks." Another relative commented, "There is a choice of food and it is good quality." Food served looked nutritious and well presented. Mealtimes were relaxed and unhurried and staff chatted and laughed with people as they assisted them with their meal. We saw drinks and snacks were available and offered to people at regular intervals throughout the day, so they had enough to eat and drink.

The kitchen was clean and tidy, well organised and stocked with a variety of provisions. The home had a food hygiene rating of five, the highest given when a service is found to have very good hygiene standards. Staff were aware of people's cultural and health needs, likes and dislikes and those with allergies or special dietary requirements. This helped them to make sure people had meals that they liked and were suitable for them.

People able to talk with us told us their needs and preferences had been discussed with them. Staff told us of the systems in use, equipment and appropriate activities used to assist individuals living with dementia. We saw these had been recorded in care plans. The environment provided sufficient space to enable people to move about the home as they wanted.

We saw people's healthcare needs were monitored and met promptly by staff and they saw other health professionals where needed. A relative told us staff had managed to restore their family member's physical health with their attention to detail and close monitoring. Another relative said, "Staff let us know straight away of any changes in [family member's] health." Two visiting health care professionals told us staff provided appropriate care and called for extra help at the right time. One professional said, "The staff report clearly and accurately and carry out instructions correctly." We saw people had visits from GP's, district nurses, chiropodists, optician's clinics and hospital appointments.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). Staff demonstrated they understood the legislation as laid down by the MCA. Records were in place to indicate that people consented to their care or they lacked capacity and best interests were followed. Care plans included information in relation to the level of the person's capacity and staff had followed the correct processes to ensure people's legal rights were protected.

Records seen and staff spoken with confirmed staff received supervision and appraisal. We saw staff training was frequent, informative and up to date. We talked with staff and saw the training matrix which identified the training staff had received. One member of staff said, "It's a really good home and I have really good training." Another member of staff told us, "If I wanted to do training out of the ordinary, the manager would support me with that." Most staff had completed or were working towards national qualifications in care.

This assisted them to provide appropriate care.

Is the service caring?

Our findings

Although a number of people had limited verbal communication we were able to speak with seven people who lived at the home. They said staff were kind and understanding and gave them time to ask or respond to questions. One person said, "They [staff] wait until I find the word I am looking for." We also spoke with three people's relatives. We saw written comments from relatives including, 'We have been blown away by your care. And 'You have gone beyond the bounds of your jobs and cared for [family member] so tenderly.'

People told us staff were caring, patient and respectful. A relative said, "[Family member] has always been treated with the utmost dignity, respect and kindness." We observed how staff supported people. Staff talked with people in a friendly and attentive manner. We saw people were relaxed and smiling in the company of staff. One person said, "The staff are always here to help me." A relative said, "Thank you for your kindness and your caring ways, your ready smile and hugs. You make Sunningdale a very special place."

Staff understood the need to protect and respect people's human rights. They knew and responded to people's diverse needs and treated people with sensitivity, respect and care. One relative said, "What an amazing team you all are. Nothing has been too much trouble." Staff respected people's right to make choices and decisions. We saw people were involved in their own care as much as they were able. Where they were unable, because of their level of dementia, their relative could be involved or an advocate to speak on their behalf.

We looked at three people's care records. Where possible people were involved in choosing the things they wanted to do and this was in their care plans. Care plans were personalised and could be accessed by people when they wanted.

People were able to remain in the home as they approached the end of life as long as staff could meet their needs. End of life wishes had been recorded in care records. Staff had the empathy, skills and knowledge to support people as they neared the end of life. We saw comments from relatives of people supported at the end of life. 'An emotional journey for us over the last few months but your support and understanding helped more than you probably realise.' And, 'You showed us all genuine compassion and sympathy. We will never forget all the love, care and kindness you showed to [family member] and us.'

Before our inspection visit we contacted external agencies about the service. They included health and social care professionals. They did not inform us of any concerns about the service.

Is the service responsive?

Our findings

We saw staff were proactive in encouraging people to chat and interact with them and each other. We spoke with staff who displayed a good understanding of people's individual needs. One relative said, "I have been so impressed with the way staff care for [people's] emotional health."

Staff responded promptly to any requests for assistance. We saw people were encouraged to choose how to spend their day if they were able. Where people could no longer choose, staff looked at the activities they previously enjoyed and those they were able to benefit from and focused on these. We looked at three people's care records. These were personalised and regularly reviewed and amended as people's needs changed. We saw where people were able, they were involved in developing and reviewing care plans. Where they were no longer able to do so, decisions were based on what the person had previously chosen in similar situations and involved relatives or advocates.

Staff respected people's family and personal relationships and welcomed families and friends into the home. Relatives were encouraged by staff to keep in touch with family and staff made their family and friends welcome.

People able to talk with us told us knew how to make a complaint if they were unhappy with their care or had concerns. They said they would tell their relative or the person in charge if they had concerns about their support. Staff knew from the non-verbal body language if a person was unhappy with an aspect of their care and they would try and resolve this. Relatives told us they would raise any issues. One relative said they could not always find the nurses but realised this was because they were with other residents. They also knew they could arrange time with the management team. A relative said "The staff always deal with any concerns I raise." Another relative told us. "I always say if I am not happy and the staff deal with it there and then."

We looked at the complaints policy which informed people how their concerns would be dealt with. There had been no recent complaints. The registered manager said they dealt with minor issues promptly so they did not become more serious. The management team frequently checked that there were no concerns for people who lived at Sunningdale or their relatives and they were satisfied with their care. From the thank you notes and compliments expressing gratitude to the staff team it was clear people who lived at Sunningdale and their relatives were positive about the management of the home and support provided.

Is the service well-led?

Our findings

There was a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager was responsible for Sunningdale and another home. However the provider and registered manager told us they were looking at changing this in the near future so the registered manager could concentrate on one home.

People told us they were happy and could talk with the registered manager and staff team. We saw people approached the management team in a relaxed way and looked comfortable when they chatted to them. Relatives were complimentary about the way the home was run and managed and felt the management team were approachable, listened and acted on discussions. A relative said, "Sunningdale is fantastic. The manager leads the home well and there are fantastic staff across the board. They all know their jobs." A relative wrote to the home stating, 'You are managing the most impressive care home. I have experienced. I could sense the good atmosphere as I walked through the home.'

The home had a clear management structure in place. The management team showed good leadership and encouraged staff to develop skills and knowledge. They demonstrated they understood their roles and responsibilities and legal obligations, including conditions of registration from CQC, and those placed on them by other external organisations. We saw the management team supervised, supported and encouraged staff to develop their skills and knowledge and provide good care.

Staff had regular informal 'chats' to seek people's views and discuss any possible changes they wanted. They spoke with relatives and the staff team and listened to their views. There were frequent surveys for residents, family and friends, staff and other professionals. Surveys had recently been sent out to ask for views on the home. We saw some had been returned and were complimentary. They expected more to be returned and would then collate the information. We also looked at the previous surveys which were also positive about the home.

Systems were in place to effectively govern, assess and monitor the quality of the service and the staff. Audits were frequent and included care plans, activities, health and safety, medication and infection control. The outcome of audits and checks were documented and any issues found on audits were acted upon promptly.

Staff told us they received good support and guidance from the registered manager, supported each other and were a good team. Staff meetings and supervisions were held to involve and consult staff. Staff told us they were able to contribute towards care practice and development of the service through meetings and supervisions. This motivated them to support people as they needed. Staff said they found the management team approachable and supportive. A member of staff commented, "It is a really supportive home. I would be happy to have any of my family members placed here." Another member of staff said, "I love my job. I wouldn't be here if I didn't."

