

Sanctuary Home Care Limited

Bransby Court

Inspection report

1 Bransdale Road Middlesbrough TS3 7QG Date of inspection visit: 05 August 2022 10 August 2022

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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 expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

Bransby Court provides care and support to people living in two 'supported living' settings. The service supports older people and young adults with physical disabilities, learning disabilities and mental health support needs. One person was being supported when we inspected.

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

Right Support: Staff focused on the person's strengths and promoted what they could do, so the person had a fulfilling and meaningful everyday life. Staff supported the person to take part in activities and pursue their interests in their local area. The person was supported to have maximum choice and control of their life 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.

Right Care: The person received kind and compassionate care. Staff protected and respected the person's privacy and dignity. They understood and responded to their individual needs. Staff understood how to protect the person from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it. The service had enough appropriately skilled staff to meet the person's needs and keep them safe. Staff and the person cooperated to assess risks and staff encouraged and enabled the person to take positive risks.

Right Culture: The person led an inclusive and empowered life because of the ethos, values, attitudes and behaviours of the management and staff. The person received good quality care, support and treatment because trained staff and specialists could meet their needs and wishes. Staff knew and understood the person well and were responsive, supporting their aspirations to live a quality life of their choosing. Staff placed the person's wishes, needs and rights at the heart of everything they did. Staff evaluated the quality of support provided, involving the person and other professionals as appropriate.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 7 July 2021 and this is the first inspection.

Why we inspected

The service was inspected to give it a rating.

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The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service effective?	Good •
The service was effective.	
Details are in our effective findings below.	
Is the service caring?	Good •
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Good •
The service was responsive.	
Details are in our responsive findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details are in our well-led findings below.	



Bransby Court

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 Health and Social Care Act 2008.

Inspection team

One inspector carried out this inspection.

Service and service type

This service provides care and support to people living in two 'supported living' settings, so that they can live as independently as possible. 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was not a registered manager in post. A manager had recently been appointed and was planning on applying for registration.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 5 August 2022 and ended on 10 August 2022. We visited the service on 5 August 2022.

What we did before the inspection

We reviewed information we had received about the service since the service was registered with CQC. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with one person who used the service and one relative about their experience of the care provided. We spoke with five members of staff including the manager and support workers.

We reviewed a range of records. This included one person's care record. We looked at one staff file in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.



Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Staff kept the person safe from avoidable harm. The person receiving support told us, "Staff keep me safe and help me." Staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so.
- Staff received safeguarding training and said they would not hesitate to report any concerns they had. One staff member told us, "I am aware of the whistleblowing policy, and would do it straight away."
- The provider had systems in place to investigate and respond to incidents, including learning lessons to improve the service.

Assessing risk, safety monitoring and management

- The person lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well.
- Managed risk taking was encouraged and supported to allow the person to lead the life they wanted. The person told us, "I can do what I want, go where I want and could leave now if I wanted to."

Staffing and recruitment

- Staffing levels were monitored to ensure there were enough staff to provide the support the person wanted. The person said, "They [staff] help me whenever I want."
- Staff were recruited safely. The provider carried out recruitment checks to minimise the risk of unsuitable staff being employed. These included Disclosure and Barring Service checks and reviewing employment histories.

Using medicines safely

• At the time of our inspection nobody was receiving support with medicines management. Training and policies were in place to do this should it be needed.

Preventing and controlling infection

- Staff used personal protective equipment effectively and safely.
- The service's infection prevention and control policy was up to date.



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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

• Support plans set out current needs, promoted strategies to enhance independence, and demonstrated evidence of planning and consideration of the longer-term aspirations. The person was involved in planning and reviewing their plan to ensure support was delivered in line with their needs and choices.

Staff support: induction, training, skills and experience

- Staff completed an induction process at the start of their employment. Newly recruited staff were introduced to the person and shadowed more experienced staff during their induction process. This helped to introduce them to their role.
- Staff received regular training to ensure they had the necessary knowledge and skills to provide effective support. One staff member said, "The training is fine. There is always plenty to do."
- Staff received support in the form of continual supervision, appraisal and recognition of good practice. One staff member said, "They're good as you sometimes need that bit of time to think about what you've done and if there is anything you could do better."

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

• At the time of our inspection nobody was receiving support with eating and drinking. Systems were in place to do this should it be needed.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The person played an active role in maintaining their own health and wellbeing. This included managing their own appointments with external professionals.
- Multi-disciplinary team professionals were involved in and made aware of support plans to improve the person's support and independence.

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 MCA 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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

• Staff empowered the person to make their own decisions about their care and support. The person told us, "I am in charge of what happens."



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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- Staff showed genuine interest in the person's well-being and quality of life which made them feel valued. The person told us, "The staff are good and make me laugh. They are good fun and are kind." We saw friendly interactions between the person and staff.
- Staff saw the person as their equal and created a warm and inclusive atmosphere. One member of staff told us, "We get to spend lots of time getting to know people."

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- The person felt listened to and valued by staff. We saw the person talking with staff about what they would like to do that day. The person told us, "I spend my days doing what I want, I am in charge."
- Staff treated the person with dignity and respect. The person told us, "They [staff] are respectful and only do the things I want."
- The person had the opportunity to try new experiences, develop new skills and gain independence. Records showed how they had been supported to do more and more for themselves, and the person was able to discuss with us their future plans and how staff would help them with these.



Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. 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

- Support staff provided focused on the person's quality of life outcomes and these were regularly monitored and adapted as the person went through their life. Records showed how staff had supported the person to set and achieve outcomes.
- The person's support was based on their assessed support needs and choices, which were regularly reviewed. The person told us, "I tell the staff what I want and can tell them if there are any changes."
- Staff spoke knowledgably about tailoring the level of support to the person's needs. This involved supporting them to do as much as possible for themselves.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

• Staff had good awareness, skills and understanding of the person's communication needs. We saw that staff were able to communicate with the person effectively.

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

• Staff encouraged and motivated the person to reach their goals and aspirations. Records showed how staff were helping the person to meet one of their current goals.

Improving care quality in response to complaints or concerns

• Systems were in place to investigate and respond to complaints. The person told us that they knew how to raise any issues they had, saying, "I would go to the manager with any problems or complaints."



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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 provider worked hard to instil a culture of care in which staff truly valued and promoted the person's individuality, protected their rights and enabled them to develop and flourish. One staff member said, "This is a nice, easy going service which provides great opportunities for people to improve their skills and knowledge in all areas."
- Staff spoke positively about the leadership of the manager. One staff member told us, "[The manager] is really lovely. Very fair and understanding."
- Staff gave honest information and suitable support to the person.

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

• The provider and manager carried out a wide range of audits to monitor and improve standards at the service. Where issues were identified remedial action was taken to address them.

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

• Staff encouraged the person to be involved in the development of the service. This included regular reviews of their support and goals as well as frequent discussions of how things were going.

Continuous learning and improving care; Working in partnership with others

- The provider had a clear vision for the direction of the service which demonstrated ambition and a desire for the person to achieve the best outcomes possible. One staff member told us, "I am proud of the work we have done with [the person] to increase their independence."
- The provider engaged in local forums to work with other organisations to improve care and support for the person.