

Sable Cottage Limited

Sable Cottage Nursing Home

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

This inspection took place 5 June 2017 and was unannounced.

Sable Cottage Nursing Home is registered to provide accommodation and nursing care for a maximum of 39 people, of which 15 people were living with dementia. On the day of our inspection 38 people were living at the home.

The home has a registered manager in post. They were present for our inspection. 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.

At the last inspection in September 2014, the service was rated Good. At this inspection we found the service remained Good.

People continued to be safe because they were supported by staff who understood how to identify and report potential harm and abuse. Staff were aware of any risks to people and what they needed to do to help reduce those risks, such as helping people to move safely around the home.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People continued to be supported by staff who had the skills to meet their needs. Staff had received training relevant to their roles and were supported in their roles by the manager and their colleagues. Checks had been completed on new staff to make sure they were suitable to work at the home.

People continued to receive food they enjoyed and were supported to eat and drink enough to keep them healthy. When they needed it, people continued to be supported to access other healthcare professionals to make sure their health needs were met. People's medicines were managed and stored in a safe way, and they had their medicines when they needed them.

People said staff treated them with kindness and compassion and they felt involved in their own care. Staff respected people's dignity and privacy and supported them to keep their independence.

People continued to receive care that was personal to them because staff knew what their individual preferences and needs were. People received their care when they needed it and were not kept waiting by staff.

People lived in a home where they felt confident to express themselves and felt comfortable to speak with staff and managers about concerns and issues that affected them. The provider encouraged people and

their relatives to give their opinions of the home through surveys and feedback forms.

The registered manager had developed an established and strong staff team. The registered manager and staff had created an environment that was welcoming and friendly and the home's positive values and culture were seen during our inspection. Staff were clear on their roles and spoke about the people they supported with respect

We saw that systems were in place to monitor and check the quality of care and to make sure the environment was safe. The provider continued to involve people in the running of the home by providing opportunities for them to make suggestions for improvements. People felt their views were respected.

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 Safe.

Is the service effective?

Good ●

The service remains Effective.

Is the service caring?

Good ●

The service remains Caring.

Is the service responsive?

Good ●

The service remains Responsive

Is the service well-led?

Good ●

The service remains Well-Led

Sable Cottage 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 checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.'

This comprehensive inspection took place 5 June 2017 and was unannounced. One inspector completed the inspection.

Before the inspection we spoke with the local authority and Healthwatch to gather information they held about the home. We reviewed information we held about the home and looked at statutory notifications we had received from the provider. A statutory notification is information about important events which the provider is required to send us by law. We used this information to help us plan our inspection of the home.

As part of our inspection we spoke with 10 people and 1 visitor. We also spoke with 1 healthcare professional who was visiting the home at the time of our inspection. We spoke with twelve staff, which included care, domestic, activities, the deputy manager and the registered manager. We spent time observing how people spent their time and how staff interacted with people. We looked at 2 records which related to consent, people's medicines, assessment of risk and people's needs. We also looked at 3 staff files to check recruitment processes, and other records which related to the quality assurance and management of the home

Is the service safe?

Our findings

People were protected from avoidable abuse and discrimination. Everyone we spoke with told us they felt safe living at Sable Cottage and trusted the staff that supported them to keep them safe. One person told us, "There is no problem here. We are all kept safe and sound." Another person said, "The staff look out for us all the time, they wouldn't let us come to any harm."

Risks to people were managed in a way that protected them and kept them safe from avoidable harm, abuse and discrimination. The support people needed was provided in a way that enabled them to live their lives safely, as they chose and to maintain their independence. We spoke with a group of people who told us that they were able to do what they wanted. One person told us, "We can do what we want. The staff are here to help us, they fuss about us because they care." Another person said, "I know that the staff always have my best interests at heart. They wouldn't let any harm come to me." Staff were knowledgeable about how to recognise and prevent any abuse of people they supported. One staff member said, "We are there to protect those who don't always have a voice."

People were supported safely and their needs met by sufficient numbers of staff. People told us, and we saw, that they never had to wait for support from staff. Staff felt there were enough staff working at the home. We spoke with two staff members about the checks the provider had completed before they started work. They confirmed the provider had requested their previous employers to provide references for them. They told us they had not been allowed to start work until criminal checks on their background had been completed to ensure they were suitable to work with people who lived at the home. These checks are called disclosure and barring service checks. the staff comments were reflected in what we saw.

People's medicines were managed safely. We saw people received their medicine safely and staff checked they were happy to take them. Staff checked each person's medicines with their individual records before administering them and records were completed correctly. Only staff who had received the required training and competency checks administered medicines.

Is the service effective?

Our findings

People received effective care and support from staff who had the skills and knowledge to meet their needs. People told us they thought staff knew what they were doing and that they understood how to support them. Staff told us they received training and support that was specific to the people they supported and their individual needs. Staff told us they had plenty of opportunities to attend training and understood how developing their skills benefitted people living at the home. For example, one staff member told us about how they had been supported to undertake higher levels of training. They said, "The manager supported me to do the training to be a senior, then I was promoted. I feel very valued by the manager."

Staff told us they had every opportunity to discuss their training requirements and progress in one to one sessions with the manager. One staff member said, "[Manager's name] is fantastic. They listen to us and always bring out the best in us."

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. The registered manager understood their responsibilities in monitoring people's ability to give informed consent in line with the MCA. They took the required action to protect people's rights and ensure people received the care and support they wanted. People told us and we saw that staff ensured they had people's permission before they supported them with anything. Staff understood the importance of obtaining people's consent.

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 2005 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We saw that, where people were subject to a DoLS, the processes were clear and robust. The staff team had a good understanding of the reasons for, and how they needed to support people.

People had access to sufficient food and drink. People told us they could choose what they wanted to eat each day even though there was a menu planned. People we spoke with all agreed that the food was good. One person said, "The food is excellent, of restaurant quality." Some people required special diets, which staff were aware of. They told us everyone was encouraged to eat a well-balanced diet. People who had difficulties eating and drinking well had been assessed by the Speech and Language Team (SaLT) and dietician.

People were supported by staff to maintain good health. They had access to healthcare services when they needed them, such as community healthcare team and referrals were made in a timely manner. Staff supported people to access doctors, consultants and other professionals and their on-going medical conditions, such as diabetes, were monitored appropriately. We saw that the relationship between the team at Sable Cottage and other healthcare agencies was very positive. We spoke with the GP who was visiting

people in a social capacity during the inspection. They told us, "We work well together. We have good communication and no major issues."

Is the service caring?

Our findings

People were supported by staff they had positive and mutually respectful relationships with. We saw that people were treated with kindness and the staff knew each person, their personal histories and interests well. People were comfortable around staff and we heard friendly and courteous interactions between them when they spent time together. One person said, "I am delighted with the care I get. The staff can't do enough, it is like living in a palace." Another person said, "The staff are wonderful. We are very well looked after." We joined in conversations with a group of people who were enjoying each other's company. All agreed that they were supported with kindness and courtesy. One person said, "I feel thoroughly spoiled here. Nothing is too much trouble." One relative who provided written feedback wrote, "It feels like a home from home. My relative is very happy here."

People expressed their wishes and opinions about the care and support they wanted and needed. They told us they felt they were listened to by staff and they felt involved in their own care. One person told us the registered manager and staff discussed what they wanted and what their hopes and aspirations were for the future. They said, "My care is what I want, when I want it. My views are respected all the time." Another person said, "The staff don't do anything I disagree with. They just wouldn't consider it."

Staff respected people's dignity and privacy. We saw and heard staff talking with people in a dignified and compassionate manner at all times. One person told us they were able to spend time in their room whenever they wanted. They said, "Sometimes I just want to have some time alone. The staff respect that always." One relative said, "I am most impressed. The staff are very patient and caring. They treat [person's name] with the utmost respect."

Staff were knowledgeable about the importance of supporting people's individuality. One staff member said, "We are all different and want different things. That does not change when you move to a care home. We are here to help people be themselves."

People had access to advocacy services if required. Advocates are independent professionals who support people to make decisions.

Is the service responsive?

Our findings

People received care and support that was individual to them. All the people we spoke with told us they enjoyed living at Sable Cottage because they were supported the way they wanted to be. People said staff asked them about how they wished to be supported to meet their personal and social care needs and they felt staff knew them and their wishes.

People's care needs, preferences, wishes and what was important to them was recorded in their care plans and staff were aware of these. These records were reviewed and updated as required. We saw that people, staff and healthcare professionals were involved in these reviews.

People were encouraged to maintain their interests and links with their local community. Staff also spent time with people to get to know what kind of pastimes they enjoyed within the home. We saw that, because Sable Cottage is in a small community, people, their families and staff knew each other. One staff member said, "When visitors come they end up spending time with everyone. That is because they knew people before they came to live here."

Staff told us they encouraged people to express their opinions about their experience of the support they received, including any concerns. One staff member said, "We want people to be happy. We can usually tell if someone is not happy and we will talk with them."

People were encouraged to give their opinions on the care and support they received and told us they were always listened to. There was a complaints procedure in place, which people had access to. However, people told us that they were happy to tell staff directly if they were unhappy. One person said, "I can go to any staff, but [manager's name] is always here to talk to. They would not let anything untoward happen." Another person said, "[Manager's name] knows everything that goes on. They are wonderful. I would always talk to them if I was worried, but the other staff would also sort things out if the manager was not here."

Is the service well-led?

Our findings

We found the home had a very positive culture which was echoed by all people, visitors and staff we spoke with. We saw that the rights of people to be and do as they wished were paramount.

The staff team were unanimous in their positive views of the registered manager and the deputy manager. They told us that they found both to be approachable and supportive. They said they were able to speak with them openly about any concerns or issues they had. One staff member said, "[Manager] is brilliant, they are so supportive. I would never be afraid to approach them if I was concerned." Another staff member told us, "I am very proud to be a part of this team. The manager and deputy gives staff confidence to question things. I trust them (manager and deputy manager) completely." All staff spoken with told us that they felt happy and appreciated by the management team.

There were regular staff meetings where staff were able to raise issues. They told us the registered manager discussed current practice and any improvements that needed to be made at these meetings. In addition, the staff had a suggestions wall, where ideas to improve the experience of people in the home could be made. Staff told us that their suggestions were taken on board and respected.

Staff understood when they could whistleblow and who they could take concerns to outside of the home, such as the local authority, police and CQC. Whistleblowing is when a staff member reports suspected wrongdoing at work. Staff also confirmed that they knew the registered manager would support them if they did whistleblow.

We saw that the management team had worked to develop new audit tools to monitor the quality of care provided and address areas for improvement. They told us that the new documents were easier to complete and also allowed easier tracking of trends in the home, such as falls. People's care needs and records were reviewed regularly and updated. Checks on medicines, the environment and the cleanliness of the home were undertaken by the registered manager and senior team.

The registered manager was aware of the requirements of their role. Statutory notifications were sent to CQC in a timely manner.