

Pro Care Homes Limited

The Sylvester Care Centre

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

About the service

The Sylvester Care Centre is a care home providing personal care to 25 people who live with dementia and other mental health conditions at the time of our inspection. The service can support up to 25 people in two double and 21 single bedrooms. There is passenger lift access to all floors and sufficient bathing facilities to meet people's needs. The Sylvester Care Centre will be referred to as Sylvester within this report.

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

The manager ensured staff were kept updated in safeguarding principles to protect people from potential harm or abuse. One person said, "It's secure here, which makes me feel safe." The management team retained good oversight of the service to maintain a safe environment. They had robust systems to ensure they managed people's medication safely. The manager ensured sufficient staffing levels met people's needs.

The manager had a training programme to underpin their workforce's skill in providing good standards of care. One person told us, "The staff are trained well. They have a good answer to everything, which gives me confidence in them." 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. The manager stated, "We train staff to help them understand how to support people in the least restrictive way." The manager had good systems to reduce the risk of malnutrition.

The manager trained staff to understand and provide care that was inclusive and respected each person's human rights. People confirmed staff were kind and respectful. One person commented, "Oh yes, the staff are definitely lovely, all of them, there aren't any rotten apples."

The manager created care plans with each person to guide staff to their personalised needs. People confirmed they had plenty to do and were fully occupied. The provider had a clear complaints policy to enable people to comment about their experiences of care.

The management team provided an open, inclusive environment. People and staff told us the new manager was a strong leader. An employee said, "[The manager] might be young, but she is clever and understands the work we do. She is the best manager I've ever had."

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

Rating at last inspection and update

The last rating for this service was good (published 29 June 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?

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.

The Sylvester Care Centre

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 carried out by one inspector.

Service and service type

Sylvester is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service did not have 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. However, we saw evidence the new manager was progressing with their registration.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke about Sylvester with three people, four staff and two members of the management team. We walked around the building to carry out a visual check. We did this to ensure Sylvester was clean, hygienic and a safe place for people to live.

We looked at records related to the management of the service. We did this to ensure the provider had oversight of the home, responded to any concerns and led Sylvester in ongoing improvements. We checked care records of one person and looked at staffing levels, recruitment procedures and training provision.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at records related to training and staffing levels.

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

- The manager ensured staff were kept updated in safeguarding principles to protect people from potential harm or abuse. Staff demonstrated a good awareness about reporting procedures. One staff member said, "I notice everything and anything, no matter how small, I report."
- People confirmed they felt safe and secure whilst living at Sylvester. One person told us, "Yes, I definitely feel safe, I could not cope on the outside so Sylvester offers me the protection I need." Another person added, "The staff know what they're doing, which helps me to feel safe."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The management team retained good oversight of the service to safeguard people against an unsafe environment. They analysed accidents and incidents to assess the effectiveness of control measures, which people confirmed helped them to remain safe.
- The manager created risk assessments to guide staff to assist people safely. These covered, for example, fire safety, infection control, nutrition and medication. A staff member stated, "We work closely as a team and communicate all the little things to make sure everyone is well and safe." The management team strengthened safety systems by reviewing lessons learned. An example of this was the introduction of new food delivery and menu options to improve people's wellbeing.

Preventing and controlling infection

- The management team guided staff about safe hygiene practices to protect people against the risk of infection. The workforce accessed and made use of personal protective equipment, such as gloves and aprons. One person told us, "It's very clean here, that's another quality of the staff."

Using medicines safely

- The management team had robust systems to ensure they managed people's medication safely. Staff concentrated on one person at-a-time, checked they had taken their medicines and signed records afterwards to evidence safe administration.
- The manager audited procedures to check their continued safety. They trained staff to enhance their knowledge and skills. People confirmed they received medicines when required. One person said, "I get my medication on time. Staff are very careful and clued up on what my tablets are for."

Staffing and recruitment

- The manager ensured sufficient staffing levels met people's needs. Staff responded to call bells quickly and calmly. They stated there were enough staff to monitor people's safety. One employee told us, "There's enough staff. Everything gets done and we have time to chat with residents." People confirmed staff were

patient and calm. One person said, "There are enough staff around. They give me time when I need a bit of support."

- The manager used the same, safe recruitment procedures we found at our last inspection. Staff stated they did not commence in post until the manager completed required checks.

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 remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- The manager had a training programme to underpin their workforce's skill in providing good standards of care. Guidance was also refreshed regularly and included fire and environmental safety, moving and handling, medication, dementia and food hygiene. People confirmed staff were experienced in their roles. One person said, "The staff are the experts, even the new staff."
- Staff stated they had good training levels and regular supervision to assist in their learning and development. An employee told us, "I feel more confident now after I had all the training, it really has benefitted me." Another staff member added, "I really feel like I've achieved things."

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

- The manager had good systems to reduce the risk of malnutrition. They focused on helping people to improve their nutrition in ways that offered choice and maximised their independence. For example, they recently changed breakfast to buffet style and one person commented this benefited them because "it gives me more choice and you can have as much as you want."
- People confirmed they enjoyed their meals and were offered alternatives if they disliked the main menu. One person stated, "The food is good." Another person added, "If you don't like anything they'll give you something else."

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

- The manager assessed people's needs and developed care plans to guide staff to maintain their health. Staff referred individuals to other agencies with a timely approach and engaged well with them as part of the person's continuity of care. A staff member explained, "It's about building relationships and working with [healthcare professionals]. They enjoy coming here."
- People confirmed staff worked effectively and in a multi-disciplinary approach as part of their ongoing support. One person said, "When I'm ill, I really am ill. There's no faffing about because the staff will ring my mental health worker or consultant to arrange an appointment."

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).

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.

- The manager obtained legal authorisation to deprive eight people of their liberty to effectively support them. Care records included regular capacity assessments, best interest documentation and updated care plans to ensure the least restrictive practice. People told us staff were well trained in related principles. One person stated, "My mood changes can be sudden and yet they are really knowledgeable about what to do straight away."
- The management team discussed and agreed care plans with people. Care records held written evidence of each person's consent. One person said, "I have signed consent to my care. The staff are really careful and make it clear they are trying to help us make our own decisions."

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

- The provider had adapted the environment to assist people who lived with dementia. For example, rooms had dementia-friendly signage to identify their purpose. A member of the management team said, "Everything is visual now to help everyone communicate their needs."

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.

Respecting and promoting people's privacy, dignity and independence

- The manager and staff delivered care centred on people's privacy and dignity. For instance, they stored records securely and knocked on bedroom doors before entering. One person told us, "This really is my home. They have made me appreciate that and don't invade my space."
- People confirmed staff were kind and respectful. One person said, "The staff are lovely, they always give you time when you need to talk about anything." Another person added, "The staff, all of them, are very kind and respectful." Staff consistently assisted people to maintain their self-reliance. A third person stated, "I am starting to get my independence back with their help."

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

- The manager trained staff to understand and provide care that was inclusive and respected people's human rights. Staff demonstrated a good awareness of the principles of personalised support. One employee explained, "It's giving them choices. You get to know people and work so close with them, so you know their likes and dislikes."
- People asserted staff were very considerate of their diverse needs and individuality. One person told us, "They don't treat us all the same, they really understand my quirkiness and that each of us really are different." Another person added, "They don't judge you and understand we are all different and need different things."

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

- The manager built care around people's expressed needs and wishes. Staff consistently supported each person to make their day-to-day decisions. One person said, "They have talked to me about my care plan. I read through it and sign it if I agree."

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

- The manager created care plans with each person to guide staff to their personalised needs. Details included reference to their preferences and centred on improving their independence. People stated care delivery was responsive and they felt they were improving. One person said, "I feel like I am getting better all the time."
- Staff discussed and reviewed care plans with people to ensure support continued to be responsive. One person confirmed, "Every so often I sit down with my care worker and [external healthcare professionals] to talk about what's going well and what I need more help with."

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

- The manager provided a programme of activities for people's stimulation. They encouraged staff to engage with each person to improve their social skills. Those we spoke with confirmed they had plenty to do and were fully occupied. One person commented, "I really do have lots to do to keep me busy. The staff also play games and other things to help us keep our minds working." Another person added, "Yes, I am well occupied."

Improving care quality in response to complaints or concerns

- The provider had a clear complaints policy to enable people to understand how to comment about their experiences of care. Although they had not received any complaints in the last 12 months, related procedures were on public display. One person stated, "I've lived here a long time and never had to complain. If I did I would go to [the manager] and she would sort it out."

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.

- The manager checked people's communication needs to support those with a disability, impairment or sensory loss. For example, there was dementia-friendly signage in communal spaces and the activity programme was displayed in pictorial format.

End of life care and support

- The provider's end of life policy outlined to staff a sensitive approach to care. They trained their workforce

to underpin their skills and knowledge. The management team was in the process of completing people's advanced care plans to ensure future decisions were considered.

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.

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 management team worked closely with their workforce to provide an open, inclusive environment and enhance communication. Everyone we spoke with commented positively about the impact of the new manager and their leadership approach. A staff member said, "It's just progressively got better. Even though she's young she is an amazing manager."
- There was a cohesive approach between the manager and staff, who told us they felt valued and supported. One employee stated, "I've stepped up into this role, which [the provider] has recognised in me and I feel great that I can make a difference." Another staff member talked about being involved in service development and added, "I feel proud of the achievement."

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

- The management team gave people satisfaction surveys to check their experiences of care. Responses we sampled were positive about service delivery. Comments seen included activities were 'very varied and interesting.' Also, 'I get support when I want it' and, 'I have never seen a member of staff show so much compassion and care...She really went above and beyond.'
- Staff said the manager was very supportive. An employee told us they had personal issues that, "She really supported me through. I'll never be able to thank her enough." People confirmed they had access to the management team and felt they were very caring. One person stated, "The new manager is great. She really cares about you and listens. She's perfect for this place."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The management team completed a range of audits to retain oversight of quality assurance and maintain everyone's welfare. These included checks of infection control, environmental and fire safety, maintenance, wheelchair safety and care records. The manager evidenced they followed up on any identified issues to ensure the continued delivery of good standards.
- The manager engaged with their workforce in a variety of forums to involve them in service development. Staff confirmed the home had a strong leader, who encouraged them to raise any concerns. One employee explained, "Anything I've suggested [the manager has] got straight on with it and involves you to make you feel proud that you've been part of that positive change."

Working in partnership with others

- The management team engaged with other services to share good practice and enhance care delivery. This included health and social care organisations. For instance, they were working with a local dentist to improve access for people.