

Sanctuary Home Care Limited

Shaftesbury Court (Manor Close)

Inspection report

Manor Close
Trowbridge
Wiltshire
BA14 9HN

Tel: 01225760228

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Outstanding ☆

Summary of findings

Overall summary

About the service

Shaftesbury Court is a residential care home providing accommodation and personal care for up to 17 adults with learning and/or physical disabilities. CQC regulates both the premises and the care provided, and both were looked at during this inspection. At the time of this inspection 14 people were living at the service.

The service has recently moved back to this location following a complete rebuild. The accommodation is on a single storey level and is comprised of two open plan communal kitchen dining rooms and lounge areas. Each bedroom has en-suite facilities and a door leading to outside.

There are also two bungalows on the site which provide accommodation for up to four people. Three of the 14 people being supported were living in these at the time of this inspection.

The service is also registered to provide personal care to people living in their own homes. At this time no one was receiving this service.

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

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, 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 providing support to people with a learning disability and/or autistic people.

Not all key questions were inspected at this time, but the service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture in relation to the Safe and Well-led key questions.

Right support:

- There were positive opportunities within the service for people to be engaged and involved.
- The new build had been designed very much with the people who lived there in mind. They had been involved in the design and plans at an early stage to ensure it worked for them.
- We saw that people were involved in the creating and ongoing review of their care plans.
- The service worked with people towards more independent ways of living.

Right care:

- We did not look at the caring key question at this inspection. However, we did observe some care interactions and saw these demonstrated genuine care for people from staff.
- People were extremely comfortable with staff and people's permission was sought at every support interaction.
- The service was dedicated to being led by the people who lived there and people were active in choosing

how they lived.

- The service had used exceptional advances in technology to effectively enhance and promote people's experiences.

Right culture:

- The service has an exceptionally positive culture that was person-centred, open, inclusive and empowering. It had a well-developed understanding of equality, diversity and human rights and put these into practice. Staff at every level demonstrated a genuine passion to promote and support people's rights within the service.
- People living at the service were valued for the individuals they were.
- There were many opportunities provided for people to be engaged and involved in the daily running of the service and their wider community.
- Staff members were visibly proud to work in the service and keen to share their knowledge of people and ways their practice supported people.

The service had excellent and well thought out infection control measures in place. Information folders and updates regarding the pandemic were readily available for staff to keep well informed and Easy read documents were in place to support people's understanding. The provider had introduced a new policy in which new employees joining the organisation had to receive their COVID-19 vaccine within three months. The service had received extremely positive feedback from a health professional about the organisation of staff when they had visited to undertake COVID-19 immunisation to people and staff. This had been shared with the GP as an example of excellence.

The service had a clear structure of accountability and defined roles. Staff felt well supported and spoke positively about their roles within the service. Staff shared their positive feedback about the support and care they had experienced from the registered manager during the last difficult year. The registered manager had been the provider's chosen winner for their last year awards ceremony for their excellent leadership and commitment to the service.

Staff followed an admirable ethos that centred around promoting independence and people's choice. Staff knew people well and relationships between people and staff were comfortable and built on mutual trust.

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

Rating at last inspection

The last rating for this service was Requires Improvement (published 26 February 2018).

Why we inspected

This was a planned inspection based on the previous rating. The service undertook an extensive rebuild and we wanted to make sure people's needs were being met at this location and that they were safe.

This was a focused inspection and the report only covers our findings in relation to the Key Questions of Safe and Well-led. The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Shaftesbury Court (Manor Close) on our website at www.cqc.org.uk.

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 well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our well-led findings below.

Shaftesbury Court (Manor Close)

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was completed by one inspector.

Service and service type

Shaftesbury Court 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.

Shaftesbury Court is also registered as a domiciliary care agency. It provides personal care to people living in their own houses and flats and specialist housing. At the time of this inspection no one was receiving the service under the domiciliary care agency.

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 a short period of notice of the inspection to enable the provider to take any additional infection control measures prior to our visit.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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. We used all of this information to plan our inspection.

During the inspection

We spoke with three people who used the service and three relatives about their experience of the care provided. We spoke with seven members of staff including the registered manager, senior care workers and care support workers.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with two professionals who regularly visit the service.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe because systems were in place reducing the risks of harm and potential abuse. Staff had all received safeguarding training, and were aware of their responsibilities in reporting concerns, and the concerns of those they supported. One staff member said, "Individuals as well as organisations should work together to prevent both the incidence and risk of harm, in short we are all responsible and need to be proactive."
- People told us they felt safe commenting, "I feel safe living here. I'm close to my parents they live near. I am happy with the staff here" and "No concerns about my safety living here. My family visit." One relative said, "No worries, none at all, I cannot speak highly enough of the staff, especially during lockdown. They have gone the extra mile keeping them safe."
- The registered manager told us areas including safeguarding and mental capacity were discussed at the start of shifts saying, "Seniors go through the principles at each shift changeover and talk through so we know if staff are living it in practice as well as learning about it."

Assessing risk, safety monitoring and management

- Risks to people's personal safety had been assessed and plans were in place to minimise these risks. Risk assessments relating to COVID-19 had been undertaken for individuals and the service as a whole, to ensure the service could continue to operate in the event of an outbreak.
- For times when people could display anxious or frustrated behaviours, care plans were in place to record how staff could best support them. This included individual triggers specific to the person and their coping strategies. We saw that people were involved in creating and the ongoing review of these.
- We saw that staff worked alongside the necessary professionals where needed in order to meet people's needs and ensure the correct equipment was obtained to support people safely.
- Records were kept to show safety checks were completed and maintained around areas including fire, emergency lighting and equipment maintenance. The registered manager told us about a newly implemented system for call alarms which enabled them to see how often someone called and how quickly the calls were answered. The system was also able to be connected to any sensors in place if a person required this level of support, for increased safety monitoring.

Staffing and recruitment

- People were supported by sufficient staff with the right skills and knowledge to meet their individual needs. We observed staff were visible and interactions were personal and caring. One person said, "Staff come quick if I need them. I choose when to get up."
- Staffing levels were flexible depending on what people had planned each week. Staff said there was enough time and staff to support people without rushing and they were able to spend quality time with

people. One staff said, "I feel that Shaftesbury Court is staffed adequately and to a level to make sure people are cared for safely. Although it is a busy place, I have enough time to do my job in a way that is respectful of the people being cared for and without being time pressured."

- The service followed safe recruitment practices. Staff files included application forms, records of interview and appropriate references. Records showed that checks had been made with the Disclosure and Barring Service (criminal records check) to make sure people were suitable to work with vulnerable adults.

Using medicines safely

- Peoples' medicines were managed and administered safely. We observed the administration of one person's medicines and saw this was undertaken safely and with the person fully involved in the process.
- Safe practices for storing medicines were followed. All medicines were stored safely and in a locked cupboard and fridge and disposed of safely when no longer required. The new building design had incorporated lockable cabinets into each person's room, so their medicines were kept separately to reduce the risk of anyone receiving the incorrect medicine.
- We reviewed people's medicine administration records (MAR) and saw that they were being completed properly and signed by the competent person administering the medicines. Where people were prescribed medicines to be taken 'as required', there were clear procedures in place to inform staff when they should support the person to take the medicine.
- Staff told us that any changes to a person's MAR were recorded clearly on a communication sheet at the front of the person's MAR and verbally communicated also. All changes to the actual MAR were checked and double signed by a second staff member. All staff administering medicines were fully trained and received a regular competency check including a knowledge quiz to check their practice remained safe.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Learning lessons when things go wrong

- Accidents and Incidents were recorded and reviewed by the registered manager. These records were then analysed by the operations manager and director. Trends and patterns were then fed back to the registered manager and used to drive improvement and reduce future risk.
- The registered manager told us previously they felt lessons learnt were not being communicated properly to staff so they had amended this process. Staff signed and read any updates to people's care following an incident.
- Staff demonstrated good knowledge of the actions to take when an incident occurred and how to report and record this. We observed good communication shared between staff members informing each other of events relating to people.

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 requires improvement. At this inspection this key question has now improved to outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- The service had a exceptionally positive culture that was person-centred, open, inclusive and empowering. It had a well-developed understanding of equality, diversity and human rights and put these into practice. Staff members were visibly proud to work in the service and keen to share their knowledge of people and ways their practice supported people.
- Staff at every level demonstrated a genuine passion to promote and support people's rights within the service. There were easy, comfortable relationships between people and staff and the service was led by the people who lived and used it. For example, a policy update had just been sent out to people so they could review and input their views about it. One staff told us "What I like about the place is that it doesn't feel like a care home, its people's home."
- There was clear dedication demonstrated to people from the staff. One person had decided at the start of the pandemic they would move back home with their family. However when one family member had to go into hospital and it impacted on this person's care, staff worked closely with the family to drive immediately to this family's address and bring the person back to the service. They continued to maintain close links and support the family as well as this person during this time causing immense relief to all concerned.
- Staff followed an admirable ethos that centred around promoting independence and people's choice. Staff knew people well and relationships between people and staff were comfortable and built on mutual trust. We observed one staff member administering medicines to a person through their percutaneous endoscopic gastrostomy (PEG), which allows nutrition, fluids and/or medicine to be put directly into the stomach. This process took time and the staff was exemplary in their easy interaction. They kept the person engaged with topics of interest and distracting with much laughter, whilst keeping them focused enough to undertake the administration in a way that was comfortable for this person.
- The service had used exceptional advances in technology to effectively enhance and promote peoples experiences. This included door sensors that linked to people's mobility equipment so the doors would open ahead of a person approaching them, so they did not need staff support to move freely around their home. This well thought through design gave people increased freedom and independence within their home.
- People and their relatives were all aware of who the registered manager was and praised the leadership, availability and approachability of them. Comments included, "It's well managed, [registered manager name] has her finger on the pulse and has a good loyal team behind her" and "We are very happy with what they have done at Shaftesbury, it's wonderful." Each year the provider has an awards ceremony to recognise staff and the registered manager had been the chosen winner for the last year for their excellent leadership

and commitment to the service.

- People living at the service were valued for the individuals they were, and this had continued after people sadly died. Two of the communal areas had been named after two residents who had passed to honour their memory and keep them in people's thoughts. In addition to this, a memory book of one person who had died was available for people who wanted some time to remember and they could view photos of this person.
- A special book of 2020 memories had been put together to evidence the unprecedented experiences people had during the pandemic. A quote at the front stated, "We can't control everything that happens, but we can change our experience of those things." The book contained pictures, news cuttings, events and the journey everyone had shared at Shaftesbury Court during this time. Some of the events included, clapping for carers, creative games played, creating a pub and funfair in the home and welcome party when people moved back into the new build.
- Staff shared their positive feedback about the support and care they had experienced from the registered manager during the last difficult year. One staff said, "I feel that the company as a whole and the management at Shaftesbury have been supportive of staff. I find the management approachable and supportive. They give positive feedback and listen to staff suggestions and concerns."

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 registered manager had notified CQC about significant events. We used this information to monitor the service and ensure they responded appropriately to keep people safe.
- The registered manager explained that before they submitted a notification to CQC, their quality team would check it first as another pair of eyes to ensure all the relevant details had been included.
- Contact details for the service and registered manager were available for people and relatives if they wished to speak to someone or raise any concerns.

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

- The provider ensured that there was effective quality assurance systems in place to monitor and drive forward the quality of service being delivered to people. We saw that an audit completed in December recorded that training in PPE had now been added to new employees induction file. This was so staff would have a more in-depth training face to face and subsequent observations to ensure it was worn correctly. Following resident meetings actions were shared in a 'You said, we did' document to show the actions that had been taken in response to people's suggestions and wishes.
- Monitoring of the service could be reviewed remotely by senior management at any time in order to take timely action where needed. At every monthly manager meeting, an internal quality assurance staff member would attend and break down per service about incidents and accidents that had occurred. This enabled a more detailed insight into any increases and trends so they could be collectively discussed and ideas shared.
- Staff were empowered to take accountability at all levels and were very much part of the monitoring process. For example, each senior had four people's care plans that they were directly responsible for. Any actions identified from audits had to be completed by them and signed off by the registered manager. Actions set from any care reviews were also recorded in each person's care plan so these were easily accessible for all staff to take note in working towards them. We saw examples of these during our review of care plans.
- Each year an internal inspection audit was completed for each service. The last one for Shaftesbury Court was completed in December 2020 and from this a report was generated. In addition, the registered manager completed a comprehensive manager audit four times a year. In addition to checking things within the

service the audits had to evidence what had been checked so pictures and documents were included as part of this enhanced process.

- The service had worked extremely hard since the last inspection in 2018 to address the areas of improvement, drive change forward and sustain high outcomes for people. One area of improvement had been around laundry equipment not working. Since this time a dedicated new laundry room had been made, separate from the main building with more equipment and space available. People were able if they wished to launder their own clothes with staff assistance to further create opportunities to move towards independent living.
- Medicine errors management had been restructured to create a more open and transparent culture. Alerts were shared with staff which included what had happened and who was involved. The registered manager explained whilst this had been painful to start with it encouraged staff to be transparent and there had been a significant reduction in medicine incidents following this. The registered manager said "It's to raise awareness and show staff who administer after an error are also part of the process." Staff we spoke with told us they were confident in managing people's medicines and felt that any medicines errors were managed well within the service and were an opportunity to learn and prevent a re-occurrence. One staff said, "The staff have a positive attitude to their work and are committed to providing a good level of care."

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

- There were positive opportunities within the service for people to be engaged and involved. Staff worked hard to support people in understanding and overcoming fears in relation to testing regularly for COVID-19 and not being able to see their family as frequently. One success had been with a person who had really struggled around being tested for COVID-19. The deputy manager had spent time with this person and involved them in helping to test others, so they understood the process and now they happily tested alongside everyone else.
- The new build had been designed very much with the people who lived there in mind. They had been involved in the design and plans at an early stage to ensure it worked for them. The registered manager told us, "It was very much about what the residents saw the place becoming. One resident came over during the build and showed us where they wanted the grab rails in their bathroom. We saw that the kitchens had been designed to be accessible to people with physical disabilities and communal areas designed to afford space."
- People and those important to them had good opportunities to feedback their views about the home and quality of the service they received through surveys, person centred reviews and meetings. Where people needed support to complete feedback, the registered manager explained different staff were chosen to support to limit any bias response. The last survey asked families to support their relatives in order to make it more service user led.
- In the wider community this involvement had continued with one person attending a Wiltshire provider workshop recently. This person had been the only service user in attendance and other providers had been grateful to receive their views and have requested further feedback from them in the future.
- People were able to input into the service and they had recently decided at the last resident meeting that they wanted to create and share their own newsletter. This was now being worked on. One health professionals told us, "There is a sense that people are provided with choice and supported to achieve individual goals."
- Communication with families had been well maintained and the service was praised for continuing these links through newsletter updates and frequent phone and skype calls. Relatives told us, "We share our views, and are part of the reviews. I could speak to staff at any time" and "The staff, the community spirit, the caring attitudes, the fact that they refer to it as their home. They make a great fuss when it's a birthday. I can't speak highly enough of the staff." One staff member said, "Members of staff at times go beyond their normal duties to ensure good life opportunities for residents and worked especially hard to keep residents positive

during the lockdowns putting on special events."

Continuous learning and improving care

- The service continued to develop action plans in response to people's voice, staff feedback and internal audits to ensure any improvements were identified and addressed.
- The service had been temporarily relocated during a rebuild and people and staff were now settling into the new build and enjoying the increased living opportunities it afforded.
- The registered manager said now they were starting to come through Lockdown they wanted to focus on "Making outcomes based on more day to day things. There is a lot of good stuff going on, but we always want to hit that next level." One staff member had spent time putting together a folder with each person about what they wanted to get back to doing now they could access the community again.
- The registered manager told us they continued to work towards future expansion of the service and were aware of service shortage in the area for people with a physical disability. They wanted to create more independent living accommodation to support residents in developing their skills and moving towards a more independent lifestyle.

Working in partnership with others

- The registered manager maintained good working relationships with other healthcare professionals in order to maximise outcomes for people. One health and social care professional told us, "I have no issue with the setting and have always found the staff friendly and engaging. I have never had to raise any concerns with the Manager who I have found to be approachable."
- The registered manager told us the support they had received internally and externally during the height of the pandemic had been very supportive. They said, "There were so many updates we listened in to. Any webinars we get the emails and the Wiltshire COVID-19 response team were amazing and still are, we could check anything with them."
- The service had received extremely positive feedback from a health professional about the organisation of staff when they had visited to undertake COVID-19 immunisation to people and staff. The feedback discussed how supportive staff had been to people and each other. The registered manager explained that staff had each gone in with a resident to receive their vaccine commenting, "Staff had it alongside the residents, so it wasn't a them and us culture." The professional explained how this had made the process so much smoother and safer to manage. The professional included that they were going to feed this back to the GP as an example of excellence.