

Sanctuary Home Care Limited

# Sanctuary Home Care Ltd- Worcester

## 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

Sanctuary Home Care Worcester is an extra care scheme based at Noble House providing personal care to 19 people living at the scheme at the time of inspection. Noble house is a complex that provides flats for people choosing to live at the scheme.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

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

People were cared for by staff who understood how to keep them safe and protect them from abuse and harm. Skilled, knowledgeable staff were available to meet people's needs. Peoples risks were assessed and plans in place to guide staff. People were supported to use safe medicine practice. Staff understood and followed infection control and prevention procedures. Incidents and accidents were investigated, and actions were taken to prevent recurrence.

People's needs were assessed, and care was planned and delivered to meet legislation and good practice guidance. Care was delivered by staff who were well trained and knowledgeable about people's needs and wishes. People were supported to have maximum choice and control of their lives 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.

People were supported by staff who were kind and considerate towards them, who people considered friends. People felt involved and supported in decision making and encouraged to have a say about any potential improvements. People's privacy was respected, and their dignity maintained.

People received personalised care from staff who knew their needs and wishes. Suggestions and ideas were acted upon from people, families and staff. Staff and the management team were responsive to people's individual needs flexed the service where possible to support people. People's concerns were listened to and action was taken to improve the service as a result.

The management team were open, approachable and focussed on providing person centred care. They completed checks to monitor and improve the quality of the service provided. The management team and staff engaged well with other organisations and had developed positive relationships. The registered manager strived to continuously improve their own skills and knowledge.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published March 2016)

#### 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?

The service was safe.  
Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.  
Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.  
Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.  
Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.  
Details are in our well-Led findings below.

Good ●

# Sanctuary Home Care Ltd- Worcester

## **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

The inspection was carried out by one inspector

#### Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought or rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care service.

#### Notice of inspection

We gave the service 24 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.

#### 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. We used all of this information to plan our 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.

#### During the inspection

We spoke with five people who used the service about their experience of the care provided. We spoke with six members of staff including the registered manager, team leader, and care workers.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked 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 were regularly involved with 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 good. At this inspection this key question has now remained the same.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff had a good understanding of how to protect people from abuse and what actions to take if they needed to report any concerns. They told us they had received training and updates in regular team meetings.
- The provider had procedures in place to ensure they met their responsibilities to report any concerns.

Assessing risk, safety monitoring and management

- People said staff supported them safely and people felt safer with staff support. One person said, "I feel so much safer when they help me, I do as much as I can myself but just having them here makes me feel safe."
- Risk assessments gave clear guidance to staff, they were reviewed regularly and amended when required. Staff had a good understanding of people's risks and knew how to help them remain safe. For example, one person told us how staff always followed safe practice when helping them to mobilise.

Staffing and recruitment

- People were supported by staff they knew, and they had confidence in. People said they had regular staff that didn't rush them and stayed for the full time. One person said, "I don't mind who comes they are all lovely and know what they are doing."
- The management team kept consistent staff where possible and were constantly recruiting to ensure they had sufficient staff available. The registered manager explained they used regular agency staff when they needed to, ensuring they used consistent staff where possible. We spoke with an agency member of staff and they told us they worked regularly for the service and knew people well. They were given all the information and support they needed to support people safely.
- Staff we spoke with told us they had provided references and there were checks in place to ensure they were suitable to be employed at the service. The management team had robust systems in place to ensure safe recruitment practice.

Using medicines safely

- Where possible people managed their own medicines with minimal support from staff. When people did need support there were procedures in place to provide this safely. One person described the safe practice staff followed when applying their creams.
- Staff were trained and had competency checks to ensure they followed safe practice. Medication records were checked thoroughly by the management team and errors found were actioned straight away.

### Preventing and controlling infection

- People said staff always followed safe practice when supporting them with their care. They told us they wore protective equipment when needed.
- Measures were in place to control and prevent the spread of infection. Staff completed training and were knowledgeable about the requirements. Staff told us they always wore appropriate gloves and aprons when they should do.

### Learning lessons when things go wrong

- When there were accidents and incidents these were reviewed by the management team and the provider to look at trends and any learning from the incident. For example, the registered manager had identified and taken effective action to improve the record keeping and were continuing to monitor the improvements.
- Staff knew how to report accidents and incidents and told us they knew any changes to peoples care and support as a result.



# 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 now remained the same.

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

- People told us the management team had assessed their needs and preferences in relation to their care and planned their support based on this. We saw these were recorded to inform staff.
- People told us their lives had improved since receiving support from the staff. One person said they were more independent and felt safer as a result of care and support they received.
- We saw tools and information on best practice guidance were available for staff. For example, we saw staff had easy access to the main principles of the Mental Capacity Act to support them with their understanding.

Staff support: induction, training, skills and experience

- All the people we spoke with said staff had good knowledge and skills to support them.
- Staff told us they had completed training as part of their induction, then had regular refreshers. They said they shadowed experienced staff as part of their induction who shared best practice knowledge. Staff were well supported and had all the information to support people well. They also said there were regular competency checks so they were reassured they were providing effective care.
- We saw ongoing training updates were arranged for staff, and staff told us they had the skills to meet people's needs.
- Staff were encouraged to further develop their knowledge and skills through vocational training.

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

- The support offered to people varied dependant on people's individual needs. People were promoted to be as independent as possible in healthy meal planning, shopping and meal preparation. For example, one person said sometimes they had a meal from the restaurant on site and other times staff helped them prepare a meal depending on how they felt.
- Staff were knowledgeable about how to meet people's nutritional needs. For example, staff understood any risks for people eating and prepared food safely.

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

- People gave us examples of when staff had helped them to access healthcare services, so people would enjoy the best health outcomes possible.
- We saw appropriate professionals were involved when needed to ensure people health and well-being improved.

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. 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.

- People said staff listened to them and respected their wishes. They told us staff checked they were happy with what they were doing.
- Staff understood the Mental Capacity Act principles and told us they had discussed them recently in a team meeting.
- The provider had systems in place to ensure they complied with the principles of the MCA. However, at the time of the inspection all the people receiving a service had capacity to consent to their care.

# 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 now remained the same.

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

- People said staff were kind to them. One person told us about staff, "They are all marvellous, so kind and caring. They really understand me and are now my friends."
- One person told us about a guest speaker who had come in to speak with people living at the scheme. The registered manager explained that they had arranged this to support people's understanding and tolerance of a particular condition.
- The registered manager was passionate about improving people's well-being and this ethos flowed through the staff team. All the people we spoke with said staff really made a difference to the quality of their lives. For example, one person told us about a guest speaker who had come in to speak with people living at the scheme. The registered manager explained that they had arranged this to support people's understanding and tolerance of a particular condition.
- Staff demonstrated sensitivity and consideration about issues around equality, diversity and human rights when discussing people they supported.

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

- People we spoke with explained they made decisions about their day to day support. They said they could ask for changes to their regular support and staff would be as flexible as possible.
- People and their families were regularly asked for feedback to ensure they were happy with the support staff provided. We saw results from satisfaction surveys were shared with people and their families and action taken to make improvements.
- People were invited to attend regular meetings where the registered manager sought feedback and ideas about improvements.
- The registered manager had put together a list of useful contacts for people to access in the area. People told us this had been really useful for them. Minutes from the meetings were available for everyone with clear "You said, we did" to show what improvements were made.

Respecting and promoting people's privacy, dignity and independence

- People told us staff respected their privacy and dignity and supported them to be as independent as possible. One person told us they how they had changed since living at the service, how their independence had improved through having greater confidence.
- People told us staff would always go the extra mile for them and were always available to support them

when needed.

- Staff were respectful of people's needs. All the staff we spoke with were passionate about the people they supported and spoke of respecting their wishes and constantly looking at how they can improve people's well-being.

# 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 now 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

- Information had been gathered from people and their families to build a detailed picture about each person's support needs, preferences and history. Staff told us they were able to provide personalised support tailored to the needs and wishes of each person.
- Records contained detailed information for staff on how best to support people with all aspects of their life. They also included detailed information about their health needs and the care people required to manage their long-term health conditions.
- Staff got to know them over time and had an excellent knowledge about people they supported.
- Staff told us that handover between shifts were really thorough and communication was good which ensure staff were able to deliver personalised care to meet people's needs.
- People told us people's support was flexible and adaptable. For example, one person said that changes were easily made depending on what support they needed, and this could be adapted at short notice where possible. People said their care arrangements were regularly reviewed to ensure they were happy with them.

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'.

- Staff knew how to communicate with people to understand their wishes. Staff found different ways to ensure they understood people's needs, for example, understanding facial expressions and body language.
- The management team were aware of the accessible communication standards and ensured people had access to their information. For example, they had information in different formats when it was needed.

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

- People were supported to access the community when agreed as part of their assessed care needs. People told us staff supported them with arrangements when they needed help.

Improving care quality in response to complaints or concerns

- People knew how to raise concerns if they needed to. One person told us they had not needed to make any complaints but were confident they could speak with the management team if they needed to. People

told us if they made suggestions these were actioned by the management team, and they felt listened to.

- The management team had a complaint policy and reviewed their complaints to ensure they acted on concerns raised appropriately.

#### End of life care and support

- Staff told us they supported people with end of life care when this was needed. They were knowledgeable about how to respect people's needs and wishes.
- The management team explained they would involve other agencies to support people who chose to remain in their own homes at the end of their life.

# 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 now 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.

Planning and promoting person-centred, high-quality care and support with openness; 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

- People said they had confidence in the management team and a good relationship with the registered manager. One person said about the registered manager, "She really listens and tries hard to get things perfect."
- The management team completed a range of quality audits on a regular basis and we saw actions were identified and addressed to bring about improvements.
- All the staff we spoke with said there was an open and positive culture, led by the management team. One member of staff said, "We are involved and encouraged to share our ideas, we are considered and very much part of the team."
- The management team were open and honest and understood their responsibility to meet the duty of candour. When improvements were needed these were investigated and shared with people and their families, and staff.
- The provider had reward systems in place to support staff feeling valued. For example, the provider offered free counselling for staff.

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

- People gave positive feedback about the care they received. They said they were happy with the flexible, caring support provided.
- The service was led by a supportive management team. Staff were clear about their responsibilities and the leadership structure.
- The management team were clear about their responsibilities for reporting to the Care Quality Commission [CQC] and the regulatory requirements. Risks were clearly identified and escalated where necessary.
- Staff were confident they could speak with the other managers if they wanted to escalate concerns.
- The registered manager constantly reviewed their practice to ensure they were up to date and following best practice guidance.

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

#### characteristics

- People all told us they knew the registered manager and they said she was flexible and adaptable and listened to their views.
- The provider used different systems to seek feedback to ensure people's voice was heard. People were encouraged to contribute their views through regular questionnaires and meetings which were shared and acted on.

#### Continuous learning and improving care

- The registered manager was passionate about improving people's experience of care and their well-being. For example, she had arranged speakers to attend meetings and share knowledge and skills. She also led fundraisers to benefit charities of the people's choice and people living at the scheme. These events involved people, their families and staff and were enjoyed by everyone.
- The management team regularly audited all aspects of their care delivery to constantly keep the support provided under review.
- Accidents and incidents were reviewed, and learning used to improve the quality of care provided.

#### Working in partnership with others

- The management team had established good links in the community to support them to provide quality care.
- Other professionals told us that staff and the management team had good relationships with them to support positive outcomes.