

# Sanctuary Home Care Limited

# Sycamore Court

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Sycamore Court provides care to people living in their own homes and or a supported living setting. 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. At the time of our inspection, 7 people were receiving the regulated activity of personal care. The service provides support to adults with autism, learning disabilities and mental health needs.

### People's experience of the 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 statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

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.

Right Support: People's individual care and support needs and any known risks had been assessed and planned for. Guidance for staff of how to mitigate risks were overall detailed and continually monitored and updated. Staff understood people's individual care needs and any associated risks.

People were supported to manage their prescribed medicines and to have their medicines reviewed by the GP. People were supported to manage their tenancy, monitor health and safety and report any repairs to the landlord.

People were protected from the risk of abuse and avoidable harm. Accidents and incidents were reviewed, and actions were taken to reduce reoccurrence and any learning opportunities were discussed with the staff team.

There were sufficient staff employed to meet people's individual care and support needs. Staff had received an induction and ongoing training and support. Staff had been safely recruited.

Right Care: People were positive about the care and support they received. They were fully involved in discussions and decisions about the care and support they received. People spoke highly of the care staff. Observations of staff engagement with people was kind, caring and respectful.

Right Culture: There was a positive staff culture. Staff were happy in their work and felt well supported. The provider had robust systems and processes to monitor quality and safety. Oversight and leadership of the service were good.

People were supported to lead active and fulfilling lives. People accessed their local community regularly, attended college courses, and recreational and leisure activities.

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 26 January 2019).

At this inspection we found the service remains Good.

#### Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook a focused inspection to review the key questions of Safe and Well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Sycamore Court on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Follow Up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

# The five questions we ask about services and what we found

We always ask the following five questions of services.

<p><b>Is the service safe?</b></p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p><b>Good</b> ●</p>
<p><b>Is the service well-led?</b></p> <p>The service was well-led.</p> <p>Details are in our safe findings below.</p>	<p><b>Good</b> ●</p>

# Sycamore Court

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

#### Inspection team

The inspection team consisted of 1 inspector.

#### Service and service type

This service provides care and support to people living in a 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

The inspection was announced. 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 used the information the provider sent us in the provider information return (PIR). This is information

providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We used all this information to plan our inspection.

During the inspection

We spoke with 6 people who used the service and 3 relatives for their experience of the care their family member received. We spent time in the company of people and observed staff interactions with people to help us understand people's experience of the service they received. We spoke with registered manager, deputy manager, project worker and 3 support workers. We reviewed a range of records. This included 3 people's care records and medicine records, and 3 staff files in relation to recruitment. We looked at a variety of records relating to the management of the service, including audits and checks, staff training, meeting records, staff deployment and policies.

# Is the service safe?

## Our findings

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

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- Staff were aware of their responsibilities to protect people from abuse and avoidable harm. Staff had received safeguarding training and were aware of the provider's whistleblowing procedure to report any concerns about unsafe care. A staff member said, "Safeguarding is talked about in tenancy meetings and one to one meetings. I know how to report any safeguarding concerns and wouldn't hesitate to do, or report to the police, CQC or the local authority if needed."
- People felt safe with the care and support they received. Positive comments were received about how staff supported people to remain safe. A person said, "I'm happy with my support, and I feel safe living here."

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- Overall, guidance in people's support plans for staff to understand people's care needs was supportive and up to date. We identified guidance could be more detailed in relation to a person's communication and a person's health need. We discussed this with the registered manager who agreed to review this information. However, we found staff to be knowledgeable, therefore demonstrating this was a recording issue.
- People were supported to maintain their tenancy. This included reviewing health and safety, fire risks and reporting any repairs to the landlord.

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- The registered manager told us how they arranged staff deployment to ensure it was safe and met people's individual care and support needs. Records confirmed what we were told. Staff were positive about staffing levels and confirmed it was sufficient and safe.
- People received care and support when they needed and requested. Due to staff being available on site 24 hours a day, staff could be flexible and responsive to any requested changes in the delivery of care and support. A person said, "The staff are all lovely and always around. We have a buzzer in our bedroom to use if we need staff, we can talk to the staff, they always answer."
- The provider operated safe recruitment processes.

A review of recruitment checks confirmed Disclosure and Barring Service (DBS) had been completed. This reports details of any convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People were supported to receive their medicines safely.
- Staff had received training and their competency assessed to ensure they were safe to support people with their medicines.
- There were systems and processes to support people to safely order, store and administer their medicines. People were also supported to have their medicines reviewed by the GP. Staff had detailed guidance of important information about people's medicines including, how and when to administer and what the medicines were for.
- People confirmed staff supported them safely with their medicines. A person said, "The staff order my medicines and make sure I take them and the doctor reviews my tablets."

#### Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- Staff had received training in infection prevention and control. They had access to personal proactive equipment. Communal areas were observed to be clean and hygienic.

#### Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- Incidents and accidents were minimal. Systems and processors were in place to report, monitor and review incidents. Any opportunities for learning to reduce further risks were discussed with staff. An example of this was the action taken to support a person who had experienced a fall and sustained a fracture.

Is consent to care and treatment always sought in line with legislation and guidance?

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

- People had mental capacity to consent to their care. Staff understood the MCA principles and gave good examples of how they supported people to consent to their care. This included what action would be required if a person was unable to consent to an aspect of their care and support.
- People confirmed they were fully involved in decisions about their care and support. Our observation of staff engagement with people was positive, and confirmed how people were supported to make informed decisions about their care and support.



# 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 our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider had systems to provide person-centred care that achieved good outcomes for people.
- The provider's vision and values were known, understood and practiced by staff. This included enabling people to lead active and fulfilling lives. A staff member said, "The aim of the service is to support tenants to lead active and fulfilling lives in a way they want to live. All the tenants get on well. Communal living here, I would say, is really positive for tenants."
- People told us how they had no restrictions in how they lived their life and gave examples of how their routines, preferences and what was important to them were respected and supported by staff. A person said, "The staff understand how to support me, what's my routines, what's important to me. I will prompt staff to do things my way. Staff can advise us about things, but it's our choice how we live."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider understood their responsibilities under the duty of candour.
- The provider displayed their last inspection rating as required.
- The registered manager had met the duty of candour and was open and honest with people and their families.
- The provider is legally required to notify us when certain incidents occur. The registered manager understood how and when to notify us and sent notifications appropriately.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- The provider's robust systems and processes that regularly monitored quality and safety were effective. There was continuous oversight of the service. Any area of improvement identified through monitoring procedures were added to an overall service improvement plan.
- People and relatives were positive about the leadership of the registered manager. A person said, "The boss is [name] they're lovely, I get on with them like a house on fire." A relative said, "On the whole [name] is certainly in the right place."

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

#### characteristics

- People received regular opportunities to share their experience of service they received.
- House meetings enabled people to discuss, 'house rules' associated with communal living. People told us and records confirmed, meetings also included any house related and staffing issues.
- Individual meetings between staff and people were completed. This was to discuss, review and amended the person's care package.
- The registered manager told us how they were working on developing training and support to enable people to participate in the recruitment of staff.
- Staff were positive about their work and felt involved, valued and listened to. The provider invited people and staff, to complete an annual satisfaction survey and this was in the process of being carried out.

#### Continuous learning and improving care

- The provider had created a learning culture at the service which improved the care people received.
- Staff had systems and procedures to exchange information with each other about people's ongoing care and support. Information reviewed demonstrated there was a positive approach to information exchange, oversight and learning opportunities.

#### Working in partnership with others

- The provider worked in partnership with others.
- Care records and feedback from staff, confirmed there was partnership working with external professionals to support people to achieve positive outcomes.