

# Sandbourne Home (Dorset) Ltd

# Sandbourne House

## 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:

Sandbourne House is a care home for adults with a learning disability. The home is registered to provide accommodation and personal care for up to eight people. At the time of the inspection eight people lived at the home.

What life is like for people using this service:

- Sandbourne House met characteristics of Good in all areas;
- The home was registered for up to eight people before the Registering the Right Support guidance was implemented by CQC in 2017. However, the outcomes for people using the service reflected the principles and values of Registering the Right Support in the following ways; people's support was focused on them having as many opportunities and choices as possible.
- Every person we met was happy, relaxed and were doing activities they enjoyed. People and staff told us they were happy living and working in the home. One person said "I feel safe here.
- There was a homely atmosphere and people's bedrooms had been personalised and decorated as the person preferred.
- People were supported to eat and drink, they had choice in what they ate and could help themselves to drinks throughout the day and cook if they wished.
- People were supported to access health services promptly. Staff knew people well including their communication needs and could identify when a person was feeling unwell, or in pain or upset.
- Care plans were detailed and explained how people liked personal care provided and what activities they enjoyed.
- Staff knew how to recognise and report abuse and were confident any concerns raised would be responded to by their manager.
- Risk assessments were in place to ensure people's safety. Medicines were managed and administered safely and recruitment practises continued to be followed.
- There continued to be a range of checks in place to ensure the safety of the home.

- more information is in the full report

Rating at last inspection: Good (The date the last report was published was 10 September 2016).

Why we inspected: This was a planned inspection based on the rating at the last inspection. The service remains Good.

Follow up: Going forward we will continue to monitor this service and plan to inspect in line with our inspection schedule for those services rated as Good. We will continue to monitor the intelligence we receive about the service. If any concerning information is received we may inspect sooner.

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

## 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 ●

# Sandbourne House

## Detailed findings

### Background to this inspection

#### The inspection:

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team:

The inspection team consisted of one adult social care inspector and an adult social care inspection manager.

#### Service and service type:

Sandbourne House is a care home. People in care homes receive accommodation and 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 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. At the time of this inspection the registered manager was on maternity leave. Appropriate management arrangements were in place to ensure the home was being managed effectively.

#### Notice of inspection:

We gave 24 hours' notice of the inspection to ensure people living at the home were informed of our visit. This would hopefully reduce any anxiety about having people they didn't know in their home.

Inspection site visit activity started and ended on 27 February 2019. During the inspection, we spoke with most of the people living at Sandbourne House, two members of staff, the deputy manager and a senior care worker. We received e-mail feedback from a health professional who had regular contact with the home.

We observed how people were supported and to establish the quality of care people received; we looked at records relating to their care and support. This included two individual care and support plans, staff training

records and the records relating to the management of the service.

What we did:

Before the inspection we reviewed information we held about the service. This included information about incidents the provider had notified us of and contacting health professionals for their views on the service. The provider had completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what it does well and improvements they plan to make.

# Is the service safe?

## Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- Staff had received safeguarding training and knew how to recognise signs of abuse. They were clear about their responsibilities for reporting concerns.
- Safeguarding incidents had been reported to the local authority and the CQC appropriately.
- There were enough staff to ensure people had access to the care that met their needs and protected them from risks. People received dedicated one to one staffing when this was required.

Assessing risk, safety monitoring and management

- Risk assessments were in place to reduce risks to people and guidance was regularly reviewed and updated.
- There were systems to keep people safe in the case of emergencies.
- The environment and equipment continued to be maintained to ensure it was safe.

Staffing and recruitment

- There was a core of staff who had worked at the home for many years and they knew people very well.
- We discussed staff recruitment with the deputy manager who confirmed there had not been any changes in the processes since the last inspection where we found the systems to be safe.

Using medicines safely

- Medicines continued to be managed safely and people received their medicines as prescribed.
- A senior member of staff conducted medication audits, including people's medication administration records (MAR). Any issues identified were responded to.
- Only staff who had been trained in the safe management of medicines administered medicines to people and regular competency checks, were carried out.

Preventing and controlling infection

- The home was clean. People told us they cleaned their bedrooms and did their laundry with staff support where necessary. Staff said they undertook cleaning duties each day to ensure the home was kept clean.
- We saw staff used appropriate infection control measures such as wearing gloves and washing their hands.

Learning lessons when things go wrong

- The service continued to monitor and learn from any incidents and accidents.

# 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.

Good: People's outcomes were consistently good, and feedback confirmed this.

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 with appropriate legal authority. In care homes 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- People's capacity to make specific decisions had been considered and mental capacity assessments had been completed. When people did not have the mental capacity to make a decision, a meeting was held to confirm actions in the person's best interests. This process included professionals and people of importance to the person.
- Staff had received training in the MCA and had an understanding of the Act.
- We observed staff supporting people to make choices. For example, if they wanted to go out, whether they wanted a drink or a snack.
- We observed staff asked people for consent when providing support.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The service applied the principles and values of Registering the Right Support and other best practice guidance. This ensured that people who used the service had a life that achieved the best possible outcomes for them including control, choice and independence.
- Assessments and care plans were easy to follow, detailed and reflected the person's preferences and wishes. The assessments and care plans reflected the complexity of people's needs and gave clear instructions for staff.
- Care plans were regularly reviewed and updated with the person, their family and professionals when appropriate.

Staff support: induction, training, skills and experience

- Staff knew people and their needs well and were skilled in caring for people.
- Staff continued to receive regular training to ensure they had the necessary skills to meet people's individual needs.
- Staff were supported through regular supervision and appraisals with opportunities to discuss any concerns, how best to meet people's needs, and their own personal development.

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

- We observed staff supporting people to eat as detailed in their care plan. At lunch time we saw each plate of food was presented nicely, however a member of staff supporting a person to eat mixed the separate food types up. They didn't ask the person if they wanted it didn't look very appetising after it was mixed together. However, the person ate it. Overall people were encouraged and supported to have regular drinks. However, when one person asked for a drink the member of staff replied saying they were busy and the person would need to wait. We intervened and asked another member of staff who explained the person usually got their own drink. We informed the deputy manager of these experiences.

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

- People were supported to have their healthcare needs met, and access relevant services when required, such as community nurse and SALT (Speech and language team.)
- The service and its staff were committed to working collaboratively and had good links with health and social care professionals. One healthcare professional told us "My experience has been that they have been very good at involving our team, staff very open to ideas and bent backwards to support a difficult family at one point. "
- Each person had a hospital and health passport which indicated their needs so they could be communicated to other health care professionals.

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

- Each person had their own bedroom which reflected their personal preferences and interest. People had chosen to personalise their bedrooms with photographs and personal items. There were lots of photographs displayed around the home of the people living there. People told us they chose the colour when their room was redecorated.



# 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

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- Staff had developed positive relationships with people. People were relaxed in the company of staff. We observed positive interactions between people and staff. People smiled, laughed and actively sought the company of staff.
- Staff were passionate about providing the care and support the person needed and expected.
- Care plans included information about people's personal, cultural and religious beliefs.
- Staff spoke about people in ways which demonstrated they cared for them on an individual level and enjoyed their company

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

- There was accessible information in an easy read format on display for those people that required it.
- People were supported by staff to make day to day decisions about their care and support. Staff described how they offered people choices using pictures and objects as prompts.

Respecting and promoting people's privacy, dignity and independence

- People's dignity and privacy was respected. For example, staff were discreet when assisting personal care and knocked on people's doors before entering.
- People were supported to maintain and develop relationships with those close to them.
- People described their independence was promoted by them traveling on a bus to a local town and by going shopping by themselves as they preferred. Staff understood the importance of supporting people to do as much as they could for themselves.

## Is the service responsive?

### Our findings

Responsive – this means we looked for evidence that the service met people's needs

Good: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People received care and support in a way that was flexible and responsive to their needs.
- Care plans provided staff with descriptions of people's abilities and how they should provide support in line with people's preferences. These were regularly reviewed to ensure they remained current and provided accurate information about how to meet the people's needs.
- The service was able to provide information in different formats, such as easy read, and were aware of their responsibility to meet the Accessible Information Standard.
- Staff had sought advice from external professionals to create decision making plans for people to ensure they had the support and encouragement to have choice and control in their everyday lives.
- People engaged in activities of their choosing. Each person had their own activities schedule this included attending planned day services in the local community.

Improving care quality in response to complaints or concerns

- There was pictorial complaints information displayed in a communal area. There had not been any complaints received since the last inspection.
- Staff described how they knew if people were not happy by how they expressed themselves, they explained how they responded to this at the time to try and resolve the issue.

End of life care and support

- Care plans included information relating to end of life care for the person.
- Staff said they had received training in end of life care, which would be refreshed if someone using the service was nearing 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

Good: 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; and how the provider understands and acts on duty of candour responsibility

- The service had a clear, positive and open culture that was shared both amongst the management team and care staff. Staff told us how passionate they were about providing good service which was personal to people. People were very much at the heart of the service.

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

- There was a clear understanding from staff and the deputy manager about what their day to day roles were.
- People and staff told us they were happy and liked the registered manager and could approach them at any time.
- The registered manager understood regulatory requirements and ensured these were carried out during their absence, such as notifying us of events.
- Audits were in place and undertaken regularly to review medicines, care plans, risk assessments, and health and safety and building checks.
- Staff told us they felt listened to and that their managers were approachable.

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

- Staff said the service's management were caring and supportive and that everyone worked well as a team.
- People's opinions about the service was sought in many ways. Each person had a keyworker, reviews were held regularly as were meetings.
- Regular staff meetings took place in order to ensure information was shared and expected standards were clear.

Continuous learning and improving care; working in partnership with others

- The registered manager and deputy manager kept their practice and knowledge up to date and attended local provider group forums.
- The service has robust systems for auditing and continually monitoring care delivery.