

Sanctuary Home Care Limited Hilltop House (Domiciliary Care)

Inspection report

2 Heldhaw Road Bury St Edmunds Suffolk IP32 7ER Date of inspection visit: 26 July 2017

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Good

Tel: 01284724979

Ratings

Overall rating for this service

Is the service safe?GoodIs the service effective?GoodIs the service caring?GoodIs the service responsive?GoodIs the service well-led?Good

Summary of findings

Overall summary

The service provides care and support to people with physical disabilities in their own flats within a communal building. At the time of our inspection11 people were receiving a service.

At the last inspection of 11 May 2015, the service was rated Good. At this inspection we found the service remained Good.

People continued to be safe at the service because staff had received training and were aware of procedures to safeguard people from abuse and manage risks to their health. Each person had a support plan and staff were aware of people's individual needs and the times to deliver support. There were enough suitably knowledgeable staff that had been recruited safely. People received their medicines as prescribed.

Staff received training and supervision to enable to them to provide the support to people with regard to their assessed needs. People gave consent to the support they received. People were given support to manage their nutrition and accessed healthcare services when required.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service support this practice.

Staff were empathic and treated people with understanding. People's privacy and dignity were respected. Staff encouraged people to maintain and develop their independent living skills.

People continued to receive support that met their individual needs and preferences. Each person had an assessment of their needs and support plan which was updated regularly as required. Staff encouraged people to pursue their hobbies and interests. People knew how to raise a complaint and were confident any concerns raised would be addressed and resolved.

An open and positive culture was maintained by the service. The registered manager led and supported the staff team to focus upon person-centred support. Quality checks and audits remained in place so that issues were identified and resolutions for improvements put in place.

Further information is in the detailed findings below.

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 remains Good.	Good ●
Is the service effective? The service remains Good.	Good ●
Is the service caring? The service remains Good.	Good ●
Is the service responsive? The service remains Good.	Good ●
Is the service well-led? The service remains Good.	Good •



Hilltop House (Domiciliary Care) Detailed findings

Background to this 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.

This comprehensive inspection took place on 26 July 2017 and was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service. We needed to be sure that someone would be in.

The inspection was carried out by one inspector.

Before the inspection we reviewed the information we held about the service including statutory notifications sent to us by the registered manager about incidents and events. Statutory notifications include information about important events which the provider is required to send to us by law. We used this information to plan the inspection.

During the inspection we spoke with four people who used the service, a relative and a professional who regularly supported people at the service. We also spoke with the area service manager, deputy manager and three other members of staff

We looked at three peoples support records. We reviewed three staff records including recruitment. We also reviewed the staffing rota, training records and quality assurance records.

Is the service safe?

Our findings

At the last inspection this key question was rated as 'good'. At this inspection we have judged that the rating remains 'good'.

People continued to be protected from the risk of abuse as staff knew people well and how to keep them safe. Staff had received safeguarding training and were able to identify signs of abuse. A member of staff told us, "I know I can make a referral to the safeguard team."

People continued to be kept safe as risks to their health were identified, recorded in their support plan and managed appropriately. We saw the risk assessments were written with regard to the specific needs of each individual. This included reviewing risks of choking and mobility, with clear instructions of how the staff were to support each person. One person told us, "This is a lovely place and I feel safe because the staff know me and talk everything through with me."

Support to each individual was provided by knowledgeable staff to meet their needs and keep them safe. The manager had worked with each person to devise a timetable for them of when staff would provide support. We saw the timetables were detailed with regard to the purpose of the visits which included, personal care, administering medicines and social activities. One person told us, "My timetable changes a little from week to week depending upon what I am doing, but it is always worked out well beforehand." Knowing people's needs well meant the manager was able to plan in advance so that there were enough staff to provide the support people needed.

We saw that there was a policy and procedure in place for the recruitment of staff. The files showed that this procedure had been followed including disclosure and barring service checks on staff. This meant that the service checked upon staff's suitability to work with the people who used the service.

People continued to be supported with their prescribed medicines. People's care plans had detailed information about the support they required to take their medicines, why they were prescribed and potential side effects. Staff carried out regular audits of medicine's stocks and records. PRN protocols were reviewed each month.

Is the service effective?

Our findings

At the last inspection this key question was rated as 'good'. At this inspection we have judged that the rating remains 'good'.

One person told us, "The staff are confident and know what to do." A relative told us, "Staff are knowledge and helpful." The manager organised training for the staff that was relevant to the needs of the people. There was an induction programme in place for new staff, which included time with senior staff and to meet the people. Staff were then provided with supervision and regular training. A member of staff told us, "The training is organised and covers all you need to know, including moving and handling." Another member of staff told us, "I have had an annual appraisal and supervision throughout the year."

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's capacity to make decisions about their care and treatment was assessed and where appropriate best interest decisions had been made on people's behalf. Consent to care and treatment had been recorded in people's support plans. Arrangements had been made for people to be supported by an advocate to help them to understand situations and make decisions. This meant that the staff understood the MCA and supported people to make decisions for themselves.

People were supported to have enough food and drink of their choice. One person told us, "The staff help me to buy the food and then cook what I want. I like the breakfasts and the Sunday roast." Staff were knowledgeable about people's dietary needs including the risks and support some people required with their diets. Staff encouraged people to have a balanced diet and specialist support had been sought as required to support people with their dietary needs.

The staff supported people to access healthcare professionals in order to maintain good health. Healthcare needs were met through people visiting their GP and dentists. A professional told us, "Staff have contacted me whenever they have been concerned about a person. I have found the staff a pleasure to work with, all advice I have given has been followed." This meant people had on-going support from professionals arranged by the staff with regard to their health needs.

Is the service caring?

Our findings

At the last inspection this key question was rated as 'good'. At this inspection we have judged that the rating remains 'good'.

The people we spoke with were complimentary about the staff. One person told us, "They look after me very well and are kind and thoughtful." Another person told us, "I like the staff because they are nice, listen to me and I mean really listen because they give me time to explain." A relative informed us the staff were understanding and supportive.

Support plans evidenced that people were involved in making decisions about how they were supported. Information was written in ways that helped people to understand the support that was provided to them. The plans had been regularly reviewed and information had been recorded that people had given their consent to the support agreed.

People told us the choices they made were respected. One person told us, "I like to go out to different things and the staff take me." Another person informed us about the things they liked to do during the day and in particular where they liked to spend their time and what music they enjoyed. They informed us the staff had listened to them to assist them to fulfil those choices. Another person spoke with us about how the staff respected them. They said, "The staff always call me by my proper name."

One person explained to us that the staff supported them with their shopping. They enjoyed this one to one time and in particular the planning of the shopping as well as going to the shops to purchase their food. This meant people were involved in their own care planning and making choices.

People told us the staff protected their dignity especially when providing personal care and support. People told us they felt comfortable with all of the staff and had developed good relationships with each staff member.

Is the service responsive?

Our findings

At the last inspection this key question was rated as 'good'. At this inspection we have judged that the rating remains 'good'.

Before people started to use the service their support needs were assessed. People and their family and other professionals were asked appropriately about the support required to determine if the service staff could provide that support. One person told us, "I remember being asked lots of questions before I came here about how the staff would be able to help me." A professional told us, "The staff seek our opinion and advice at the assessment stage in order to get the assessment right." People told us they felt involved in the assessment and planning process of their support.

People's support records were kept up to date with staff writing information in the daily notes regarding each visit and then transferring relevant information as required into the support plan. A member of staff told us, "I write each time I support a person and always read the support plan as well as say to the person is all okay, have there been any changes?" We saw that the plans focussed upon the needs of each person and took into account their choices and preferences. Support plan reviews were planned in advance and we saw that audits of the support plans were regularly carried out. This meant the support plans were regularly reviewed for the purpose to check that the support provided was recorded and responsive to the person's needs.

One person explained to us that the staff supported them with their shopping. They enjoyed this one to one time and in particular the planning of the shopping as well as going to the shops to purchase their food. This meant people were involved in their own care planning and making choices.

There was a complaints policy and procedure. These details and how to make a complaint were provided to people when they first began to use the service. There was also information about how to raise a complaint in each of the people's support plans we saw. The deputy manager explained to us how a complaint would be logged and the action taken to resolve a complaint. There were no open complaints at the time of the inspection and the staff considered this was because they were in contact with people each day and resolved any issues as they arose. We saw a number of compliments about how people had been supported from a number of resources. A relative told us, "[My relative] is very happy at Hilltop, we both have no complaints at all."

Is the service well-led?

Our findings

At the last inspection this key question was rated as 'good'. At this inspection we have judged that the rating remains 'good'.

A registered manager was in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the is run.

Services that provide health and social care to people are required to inform the Care Quality Commission (CQC) of important events that happen in the service in the form of a notification. The CQC had been informed of significant events in a timely way by submitting the required notification. We had also been informed about lessons learnt by the service staff and actions taken to improve the service for the people regarding the auditing of medicines. We saw at the inspection evidence to the lessons learnt. This meant that we had been able to check that appropriate action had been taken.

All of the people we spoke to told us that the home was well managed and that the manager and deputy manager were kind. This view was also shared by the staff. One member of staff told us, "The manager listened to us and then planned improvements after appointment rather than rush in and make changes." Another member of staff told us, "The manager is supportive and a very good leader."

The registered manager had provided supervision and support to staff and provided opportunities for them to develop their skills. We saw that training was provided and staff were encouraged to seek additional relevant training for their development and to support people with their needs at the service. This meant the registered manager was managing staff and developing the staff to provide consistent staffing and support to the people.

The manager had an open door policy and was a visible presence. People told us that they saw the registered manager whenever they were on duty. Staff told us that the manager had taken time to get to know the people using the service as well as the staff. A member of staff told us, "We talk about how I am supporting a person in supervision and the manager actually knows them and their needs and this is so very helpful."

There were systems in place to monitor the review the quality and effectiveness of the service. These included the completion of regular audits and checks of areas such as medicine administration and support plans as well as seeking feedback from people and professionals. The registered manager was also supported from regular visits and results of audits organised by their manager.