

Sunnybank P.R.S. Limited

# Sunny Bank PRS

## Inspection report

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Date of inspection visit:

06 February 2019

07 February 2019

Date of publication:

22 March 2019

## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Outstanding 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

Sunny Bank PRS is a privately owned care home providing psychiatric rehabilitation services for up to 21 people with mental health needs. The service also provide day care services.

At our last inspection we rated the service Outstanding. At this inspection we found the evidence continued to support the rating of Outstanding and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns.

People's experience of using this service:

At this inspection we saw the service continued to provide outstanding care overall. The provider and registered manager continued to use research based care and treatment to improve people's recovery from a mental illness.

Two directors both took an active part in the day-to-day running of the home. One director was a registered occupational therapist and the other director was a registered mental health nurse (RMN) who specialised in behavioural management.

People who used this service continued to benefit from an outstanding effective and well-led service. The service consistently maintained good practice in the treatment of people with a mental health illness. People we spoke with all told us they could go and talk to the directors when they liked and had confidence that they would be listened to. People made comments such as, "The [directors' name] is a hard worker and very good. You can talk to [name of director]" and "I have no concerns. I can talk to the managers if I do."

People received an exceptional assessment tailored to their individual needs. The assessment lasted a minimum of six weeks and took account of people's diverse backgrounds. One person going through the assessment was from an ethnic minority. We saw that through the assessment process the person could follow their religious and cultural needs in the way they wanted to.

Each person's recovery program commenced during the assessment process. We saw that the service ensured they took as much personal details of a person, their background, likes and dislikes as they were able. This included daily living skills as well as the psychological and sociological aspects of the person and their behaviours. This information was used to develop a detailed care plan, which was tailored to meet people's needs and preferences.

The service followed a mental health recovery program and liaised with other organisations and professionals to aim for as much independence as possible for each person. If people recovered they had the option to move to supported living under the same organisation or to independent living. This ensured people could still receive some support if they wanted it.

We found that the directors and the registered manager had substantial knowledge about ways to help enable and support people to recover from mental health illness. They were highly proactive in ensuring that the service consistently maintained and sustained high standards in the best interests of the people who used the service.

We found that the directors and the registered manager worked together to deliver exceptional leadership within the home. They promoted a positive culture that embraced everyone connected with the service. Staff we spoke with told us, "My support is very good. There are always opportunities to talk to management" and "The owners are very good to work with. They have people's best interests at heart. The providers go above and beyond getting what is right for people. They lead by example and inspire us. Nothing is too much trouble."

Staff were well trained and encouraged to find training they wished to do which would also benefit people who used the service.

The service had achieved accreditation from several quality assurance schemes and were recognised as a good provider by local authorities.

The service provided exceptional support to people who used the service in respect of their life skills such as cooking. This helped promote independent living.

The service provided healthy living advice and supported people to go to colleges to improve their confidence or life skills.

The service had a strong sense of promoting social inclusion and people were supported to be active members of their communities. Staff understood the Equality Act and empowered people to explore their diversities whilst supporting them to maintain their own safety.

People's diverse needs were considered in respect of their age, gender, sexuality and religion. This included the food they prepared and any religious needs a person wished to follow.

The service was warm, clean, well decorated, had no offensive odours and provided people with a homely environment.

Medicines administration remained safe.

Staff told us they had time to sit and talk to people. Staff also arranged and supported people to go on outings or attend appointments if required.

Some activities and outings were researched based to help the recovery of people with a mental health illness.

People' care was consistently personalised to their need. During our inspection, we found many examples to demonstrate the staff and management team were passionate about providing an innovative and excellent service.

The service asked people who used the service, stakeholders and family members what they thought of the quality of service provided and acted on the views to improve the standards of care and support.

Rating at last inspection: The service was rated as outstanding at the last inspection.

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

Follow up: We will continue to monitor the service through information we receive and future inspections.

## 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 exceptionally effective

Details are in our Effective findings below.

Outstanding ☆

### 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 exceptionally well-led

Details are in our Well-Led findings below.

Outstanding ☆

# Sunny Bank PRS

## 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, 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.

**Service and service type:** Sunny Bank Psychiatric and Rehabilitation Service providing personal care. People in care homes receive accommodation and nursing or personal care. 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.

#### Notice of inspection:

The first day of the inspection was unannounced. We inspected the service on 06 and 07 February 2019.

#### What we did:

Before the inspection we reviewed information we held about the service including notifications the service was required to send us about things happening in the home, information from other stakeholders, for example the local authority and information from members of the public. In addition, the provider completed a Provider Information Return (PIR). Providers are required to send us key information about their service, what they do well, and improvements they plan to make. The information the service provided was highly detailed and helped support our inspection.

During the inspection we spoke with several people living in the home (three in depth) two members of care staff, an administrator/care coordinator and one of the directors. We also reviewed care and medication records of four people, records of accidents, incidents and complaints, quality and maintenance checks and

surveys conducted by the provider.

We observed interactions between staff and people living in the home and looked around the building.

# Is the service safe?

## Our findings

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

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

At the last inspection of April 2016 this key question was rated as good. At this inspection the service continued to be rated as good.

Systems and processes to safeguard people from the risk of abuse.

- People told us they felt safe living at this care home and made comments such as, "I feel very safe here."
- Systems were in place for staff to report any concerns they had about people being at risk of abuse.
- Care staff had undergone training in safeguarding people and knew how to recognise abuse and protect people from the risk of abuse.

Assessing risk, safety monitoring and management.

- Risks to people were assessed and managed in line with the person's choices.
- Risk assessments were updated regularly to ensure people's health and social needs were met.
- The environment and equipment was maintained to a high standard.
- Specific 'residents' had a personal emergency evacuation plan to assist the fire service if a fire occurred and there was a business contingency plan to ensure the service responded to any other type of emergency.

Staffing and recruitment.

- There were sufficient well-trained staff to meet people's needs. Staff told us they had time to sit and talk to people or take them out to attend activities of their choice or medical appointments.
- Staff were recruited robustly to ensure they were safe to work with vulnerable people.

Using medicines safely.

- At the last inspection we saw medicines were safely administered. At this inspection we found the systems and checks for ensuring medicines continued to be safe.
- Staff were trained in medicines administration and had their competencies checked to ensure they continued to follow good practice.

Preventing and controlling infection.

- We saw the systems for the prevention and control of administration remained safe.
- Staff were trained in infection prevention and control and used policies and procedures to follow safe practice.
- The home had been awarded a 5 star food hygiene rating by the foods standard agency which is the highest rating.
- At the latest local authority infection control audit on 29/11/2019 the service was rated as being 100% compliant.



Learning lessons.

- The service liaised with the local authority and other organisations where people's care and treatment required more intensive input.
- Where improvements to the service were identified the improvements were implemented through business plans which were tied to the CQC key lines of enquiry.

# 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.

Outstanding. People's outcomes remained consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

At the last inspection of April 2016 this key question was rated as outstanding. At this inspection the service continued to be rated outstanding.

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, and some hospitals, 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 told us and we observed during the inspection that staff asked for their consent before they were supported.
- When people lacked capacity to make decisions for themselves meetings were held with the people who knew them best to ensure decisions were made in the person's best interest.
- For the five people who were subject to restrictions on their liberty, appropriate processes were followed to ensure the restrictions were the least restrictive in line with the Mental Capacity Act (MCA) and reviewed to ensure the restriction continued to be required.
- Staff had undergone training in the MCA and understood its requirements.

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

- The assessment for people who used the service was exceptional. Each assessment was undertaken over several weeks and the service liaised with other professionals to ensure the service would meet people's needs.
- People's needs and choices were explored and incorporated into the care plan. People were put at the forefront of any decisions.
- The age, sexuality, gender, ethnicity and religion of each person was assessed to ensure any care was delivered with respect to protect people's dignity. People were able to follow their chosen lifestyle by eating food prepared in a specific way or attending a religion of their choice.

- Using a recovery system, the care of people was flexible and helped people become more independent. People had moved on to independent living from this service following a successful recovery.

Staff support: induction, training, skills and experience.

- Staff told us, "I think we do enough training to do the job and they will accommodate us if we have any needs. We do expert patient courses, which means service users go to the training as well as a staff member and learn about how best to look after or be cared for in a healthy way." and "The service is fantastic we get individual opportunities for training. The provider has said I can look for courses to progress my career. The way we work is tailored to each individual."
- The directors looked at the needs of people who used the service and the staff team as a whole. One of the directors told us, "Each year we ask staff if there are any particular needs we need to look at. This year we have decided upon autism. We research best practice and ask speakers from relevant societies to attend." This kept staff informed about people's specific needs.
- People who used the service told us they thought staff were well trained and knew what they were doing.
- Staff were supported to undertake additional training such as vocational health and social care courses or around people's specific mental or physical health needs.
- New staff received an induction to ensure they were confident and competent to look after vulnerable people. We saw that staff new to the care industry were enrolled upon the Care Certificate which is a nationally recognised training course.

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

- People were encouraged to help plan the menu and supported to cook. We saw one person was cooking a meal for other residents with staff support. The person was on assessment and wanted to provide a meal prepared to their different ethnic background.
- People told us, "I am learning to cook and I enjoy it. The food is very good. You get a good choice of food. If you don't like it just tell the staff and they will get you something else." and "The curry evening last night was lovely. The food is good."
- People could make their own drinks and snacks during the day. One part of the kitchen was equipped for people to use to practice their cooking skills.

Staff working with other agencies to provide consistent, effective, timely care.

- People were registered with their own GPs. People had access to a wide range of professionals and specialist such as psychiatrists and were supported to attend routine appointments at dentists or opticians. A person told us "Staff arrange appointments to the doctor, chiropodist and dentist."
- Staff followed appropriate guidance provided by healthcare professionals.
- Each person was supported to attend annual health checks with healthcare professionals.
- The service was involved in trials for people to have video conference Psychiatrist appointments via a secure computer link. The director said this had gone much better than a visit to hospital because people were less stressed.

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

- People could personalise their rooms to their own tastes and encouraged to shop for their own items to help retain their independence. A person who used the service told us, "I have a nice room, my own television and iPad. I have more television channels on my laptop."
- We saw that people could go outside when they wished and there was an area for people who smoked.
- There were several areas for people to sit, either in a group or for therapy sessions. There was also areas people could sit quietly.

Supporting people to live healthier lives, access healthcare services and support

- People had access to any specialists or professionals they needed to see and staff would support them to attend appointments if they wished. The service also made arrangements for people who did not feel comfortable visiting hospitals or clinics by arranging for them to be seen at the home.
- We saw that people were supported to attend routine appointments at dentists, podiatrists and opticians.
- We saw that where any advice was gained this was incorporated with the person's agreement into the plans of care which ensured they received up to date treatment.
- On one day of the inspection a nurse practitioner was attending the home undertaking annual health checks which were to be completed for all people who used the service.

# 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

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

At the last inspection of April 2016 this key question was rated as good. At this inspection the service continued to be rated as good.

Ensuring people are well treated and supported; equality and diversity.

- People who used the service told us, "It is a very good home. They treat you like royalty"; "The staff treat us very well. The care is fine. The staff are nice and pleasant." and "The staff are all right. I get on with everybody."
- We observed the care being provided on both days of the inspection. Staff were pleasant and talked to people, had a joke and quickly and skilfully de-escalated any signs of anxiety.
- People were treated according to their needs and beliefs. This included for any religious or ethnic choices a person had. People were assisted to follow the religion of their choice in the way they wanted to.
- We observed a bingo session. The staff member and people who used the service had a good time and the interaction between all was good to see. The staff member was patient and aware of how to get people to join in.

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

- At all times during the inspection people were given respect in the choices they made. We observed staff discussing what a person wanted to do or arranging to take them out if they expressed a desire to. Staff knew people very well and talked to people in a friendly way.
- People were encouraged to attend the regular meetings about service provision and their views listened to. One person requested something that needed to be fixed and we saw this was done. Meals were also planned at meetings. One person wrote out the menu for the day and placed it on the tables.
- People had chance to sit and talk to their keyworker regularly to discuss their care and treatment. Any decisions were recorded and staff followed through with any activities or support the person required.
- All the people who used the service could verbally communicate. Information about the service was provided to them in a suitable format and where necessary explained during the assessment process.

Respecting and promoting people's privacy, dignity and independence.

- People could and did go to their rooms and we saw staff respected their wishes for privacy.
- Any care or support issues were discussed away from communal areas. For example, the health checks were conducted in a room away from where conversations could be heard.
- The whole ethos of the service is to rehabilitate people to independent living where possible and to maximise the potential of all clients, including those for whom Sunny Bank may be home for longer. People had moved to more independent houses following successful treatment.

- ☐ People were supported to retain or learn life skills such as cooking, cleaning, shopping and doing the laundry. We saw people were at different stages of recovery and each program was individual to each person.
- ☐ Activities were planned around what the person wanted and where possible people went out on their own or with their friends. Staff supported people only when needed.

# Is the service responsive?

## Our findings

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

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

At the last inspection of April 2016 this key question was rated as good. At this inspection the service continued to be rated as good.

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

Personalised care.

- People's care plans were personal to the person and reflected their choices. Staff told us that people who used the service were at the forefront of their care planning.
- We saw the care plans reflected individuality in the way they encompassed people's wishes.
- Plans of care were developed during the exceptional assessment process and reviewed regularly to ensure they were effective.
- Some staff were designated to seek out suitable activities and there was a broad range on offer. Some activities could be taken as a group or individually if that is what people wanted. Activities also reflected the recovery program such as budgeting and shopping for personal items. People we spoke with told us how much they enjoyed all the activities on offer.
- Some of the activities on offer were researched based and shown to improve mental health conditions such as walks in the countryside.
- The activity equipment provided reflected the needs of people who used the service. This included a keyboard, which we heard someone playing and a karaoke machine for social get togethers. Some people had their own computers or tablets for their entertainment. A person who used the service told us, "I like living here. I do all sorts like art and going to coffee mornings. I go on every trip. I am going to Madame Tussauds next. We will have fish and chips there."
- People were able to attend community venues to learn skills such as computing, life skills and mental health well-being. People were also able to access community activities to socialise. This included a zumba dance class in a local fire station and a café which was mental health/dementia friendly.

Improving care quality in response to complaints or concerns.

- The home had a complaints policy in place and people told us they knew how to complain. However, nobody had any concerns. The directors of the home were highly visible (both work at the home) and regularly spoke to people who used the service which gave them an opportunity to raise any "niggles".
- There was a system to record any concerns or incidents if required.

End of life care and support

- Processes were in place to support people at the end of their life.
- Staff were trained in end of life care and we saw that people's last wishes were recorded in the plans of care. This ensured people would receive appropriate support at the end of their lives and staff could support

bereaved families



# 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

Service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

At the last inspection of April 2016 this key question was rated as outstanding. At this inspection the service continued to be rated outstanding.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility.

- □ The directors and registered manager provided exemplary leadership and were well thought of by people who used the service and staff. Staff made comments such as, "My support is very good. There are always opportunities to talk to management."
- □ The registered manager had access to support from the registered provider to enable them to meet their responsibilities in a timely way, for example, health and safety, maintenance, communications and training team. The provider and registered manager worked as a team to maintain and improve standards.
- □ The service had a culture which aimed for everyone to fulfil their full potential by setting realistic and achievable goals for people, whilst at the same time giving people opportunities to have maximum choice and control over their life. One person said their aim was to move towards independent living.
- □ The directors and registered manager demonstrated a commitment to provide meaningful, person-centred, high-quality care by engaging with everyone using the service and stakeholders.
- □ The service had gained accreditation with Investors in People (IIP) and the International Organisation for Standardisation (ISO 9001). These organisations independently look at management and quality standards including the planning and promoting of person centred care and providing effective staff leadership. The director told us, "I feel ISO provides us with a clear identity that our processes are working and helps maintain quality and support for our clients. The system invites staff and people who use the service to decide what is important to provide a quality service."

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

- □ 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.
- □ Staff we spoke with told us, "There is a good staff team." and "There is a good staff team and we support each other. It is one of the strengths of working here. There is minimal hierarchy and an open door policy. Ideas are listened to and addressed."
- □ The directors developed business plans to improve the service using the CQC key lines of enquiry (KLOE) which ensured they understood the regulatory requirements.
- □ There was an organisational structure in place and staff understood their individual roles responsibilities and the contribution they made to the service.

- The director we spoke with had a clear view of the service and was able to respond to any questions we asked in a positive manner.
- The service had very strong governance systems in place to improve the service. All aspects of the service were monitored.
- The management team and staff we spoke with demonstrated their commitment to provide to provide a high quality service.
- Staff received support during their one to one supervision sessions which they told us was a two way process and they could bring up any needs they had.

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

- We saw the results of quality assurance surveys sent to stakeholders, family members and people who used the service. The results were extremely positive from all responses. There were no negative scores or responses. The survey's included questions around care, professionalism of staff, management, social inclusion, dignity, diversity, assessment and care planning. Comments from stakeholders included, 'I am very pleased with the standard of care, planning and social inclusion. I would highly recommend this service'; 'This is a well-led service which provides effective support' and 'Staff are always willing to listen'.
- Family members commented in the surveys, 'The fact that we have been able to give the top rating to each of the questions illustrates what an exemplary service this is' and 'I believe the care and attention is above what I expected. I am happy with the care and feel that it is a safe environment for my relative'.
- People who used the service and staff were encouraged to participate in regular meetings to gain their feedback on how the care home was performing. We saw action was taken to incorporate any topics raised which included changing the menu and updating the environment for people who used the service and finding bespoke training for staff.
- The service provided details of what services and treatments the service offered, some in an easy read format so people and professionals knew what to expect at this care home.

Continuous learning and improving care.

- As staff came on duty there was a handover from the previous shift where people's changing needs for the day were discussed. There was also a communication book for staff to remind each other of key events such as appointments.
- Staff were encouraged to undertake training they were interested in which would also benefit the service and people accommodated at the home. We saw staff had undertaken training for pressure sore prevention, Huntington's disease, anxiety awareness, mental health awareness and sexuality and relationships. This showed the service were committed to improving care.
- The provider had developed business plans which showed us how the service audited their systems, developed a plan for improvement and which member of staff was responsible for the improvement. The providers regularly ensured the plans were being adhered to help monitor the quality of service.
- Staff had access to a 'resource box' which contained the details of current best practice guidance for topics around mental health care.

Working in partnership with others.

- The service had links with other organisations and liaised with them to ensure the care people received was monitored and up to date.
- The service had been assessed as a suitable organisation to place people with mental health illness by three local authorities.
- The service provided a lot of information on noticeboards and storage spaces of other organisations people who used the service could contact for advice. This included the advocacy service and various

hospital treatments.

- The service liaised with colleges and voluntary organisations to ensure any information about people who used the service could be used to help them achieve any work or learning they wanted to undertake.