

## Sanctuary Home Care Limited Sanctuary Home Care Ltd -Doddington

### **Inspection report**

Benwick Road Doddington March Cambridgeshire PE15 0WD Date of inspection visit: 31 March 2016

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Good

Tel: 01354742957

#### Ratings

### Overall rating for this service

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

### Summary of findings

### **Overall summary**

Sanctuary Home Care Ltd- Doddington is a an extra care scheme that provides personal care services to older people living in their own homes in Doddington Court. They also supply staff to provide personal care for up to nine people in an intermediate care facility within Doddington Court The service also provides housekeeping services such as cleaning and shopping although this service is not regulated by the Care Quality Commission (CQC).

We inspected the service on 31 March 2016. The inspection was unannounced. At the time of our inspection 38 people including four people in the intermediate care facility were receiving a personal care service.

There was a registered manager in post at the time of our inspection. A registered manager ('the manager') is a person who has registered with CQC to manage the service. Like registered providers ('the provider'), 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 service is run.

CQC is required by law to monitor how a provider applies the Mental Capacity Act 2005 (MCA) and to report on what we find. Staff had received training in this area and demonstrated their understanding of how to support people who lacked the capacity to make some decisions for themselves.

People were at the heart of the service. Staff understood what was important to each person and worked closely with each other and other professionals to promote their well-being and happiness.

Systems were in place to meet people's needs effectively and safely. Staff were aware of the procedures for reporting concerns and protecting people from harm. Staff were only employed after the provider had carried out satisfactory pre-employment checks. Staff were trained and were well supported by their managers. There were sufficient staff to meet people's assessed needs.

The CQC monitors the operations of the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS) which applies to care services. We found people's rights to make decisions about their care were respected. Where people were assessed as not having the mental capacity to make decisions, they had been supported in the decision making process. DoLS applications were in progress and had been submitted to the authorising body.

People's health, care and nutritional needs were effectively met. People were provided with a varied, balanced diet and staff were aware of people's dietary needs. Staff referred people appropriately to healthcare professionals. People received their prescribed medicines appropriately.

People received care and support from staff who were kind, caring and respectful. Staff respected people's privacy and dignity. People, their relatives, staff and other professionals were encouraged to express their views on the service provided.

Care plans contained all of the relevant information that staff required to meet people's needs and therefore people could be confident that they always received the care and support that they needed. Changes to people's care was kept under review to ensure that the care and support provided was effective. The registered manager assessed any potential risks to people and staff and put preventive measures in place where required.

Staff supported people to take part in hobbies, interests and activities of their choice. There was a varied programme of activities available to people.

The registered manager was supported by senior staff and support workers. There was a good management structure in place and staff were clear on reporting procedures. People, relatives and staff told us the service was very well run and that staff in all positions, including the registered manager, were approachable. People's views were listened to and acted on.

The provider went above and beyond the core homecare contract in a number of different ways. People were given lots of opportunities to meet each other socially and the recruitment of a daily activities coordinator had taken place. The hope is that they are able to offer more choice of activities and social events to take place based on people's choices. Staff and volunteers encouraged people to retain an active presence in their local community and to maintain personal interests and hobbies.

The registered manager was known personally to everyone who used the service and provided staff with strong, values-led leadership. Staff worked together in a friendly and supportive way. They were proud to work for the service and felt listened to by the registered manager and provider.

The provider was committed to the continuous improvement of the service and maintained a range of auditing and monitoring systems to ensure the care provided reflected people's needs and preferences. The provider sought people's opinions on the quality of the service.

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

We always ask the following five questions of services.

Is the service safe?	Good •
The service was safe.	
People were supported to take their prescribed medicines.	
There were sufficient numbers of staff to keep people safe and meet their assessed needs.	
Staff were only employed after all the essential pre-employment checks had been satisfactorily completed.	
Is the service effective?	Good •
The service was effective.	
Staff had the knowledge and skills required to meet people's individual needs and promote their health and wellbeing.	
Senior staff provided staff with support, including regular direct observation of their care practice.	
Staff worked very well with local healthcare services and supported people to access any specialist support they needed.	
Staff assisted people to eat and drink whenever this was required.	
Is the service caring?	Outstanding 🛱
The service was very caring.	
Care and support were provided in a warm and friendly way that took account of each person's personal needs and preferences.	
Staff know people as individuals and supported them to have as much choice and control over their lives as possible.	
People were treated with dignity and respect and their diverse needs were met.	
Is the service responsive?	Good •

The service was responsive.

The service had the ability to respond promptly to people`s changing needs. People received care that was tailored and based on their needs and preferences. People were actively involved in the preparation and review of their personal care plan.

People were fully supported by staff to engage in activities Staff enabled people to engage in various activities and meet other people at events organised by the service.

People knew how to raise concerns or complaints and were very confident that the provider would respond promptly and effectively.

#### Is the service well-led?

The service was well-led.

The culture of the service was positive, person centred and inclusive.

The management were described as approachable by staff and families. Feedback was regularly sought from families and comments and suggestions acted on.

There were robust systems to ensure quality and identify any potential improvements to the service. The regular audits carried out identified areas in need of improvement which were followed up in subsequent audits to ensure improvement were made and completed. Good



# Sanctuary Home Care Ltd -Doddington

**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 was planned to check whether the registered persons were 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.

The inspection took place on 31 March 2016 and was unannounced. It was undertaken by one inspector.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form the provider completes to give some key information about the service, what the service does well and improvements they plan to make. The provider returned the PIR and we took this into account when we made the judgements in this report. We also reviewed other information that we held about the service as notifications (events which happened in the service that the provider is required to tell us about) and information that had been sent to us by other agencies.

We observed how the staff interacted with people and how they were supported during their lunch.

We spoke with nine people who used the service, one visitor, the registered manager, the administrator, a team leader and five care staff

We also looked at two people's care records, staff training and recruitment records, and records relating to the management of the service including audits and policies.

People told us they felt safe using the service and that care staff treated them extremely well. One person said, "I feel very safe here there is always a member of staff around to help you." Another person told us, "All the staff make me feel very safe and I have my emergency bell if I need to use it. They [staff] come quickly when I have had to use it in the past."

Staff demonstrated to us their knowledge on how to recognise and report any suspicions that people may have suffered any harm. They were knowledgeable regarding their responsibilities in safeguarding people and they had received training regarding protecting people from the risk of harm. They were aware of the safeguarding reporting procedures to follow when required. One member of staff said, "I have received safeguarding training and I would not hesitate in reporting any concerns to the [registered] manager." Another member of staff said, "I would go straight to my manager, I know they would sort it out." Another member of staff told us, "I would report any concerns to the team leader or the manager, I would also fill in an incident form and write a statement as well as helping the service user to make a complaint if they wanted to." All staff we spoke with told us and showed us they carry a card giving details of the key contacts and telephone numbers in case of emergencies. These include but not limited to, safeguarding, on call and head office. We saw that there were safeguarding reporting guidelines available in the office and in the main entrance to the Court which included key contact numbers for the local authority safeguarding. Records showed that appropriate processes had been followed to ensure people are kept safe from harm.

There were systems in place to reduce the risk of people being harmed whist still promoting their independence. Information relating to the identified risks was detailed regarding how staff ensured that all measures were in place to keep people safe. Risk assessment were completed for but not limited to use of wheelchairs, medication and falls. Risk assessments had been reviewed to ensure that they remained effective especially when people had recently started to receive a care and support package. This ensured people were kept as safe as possible

People we spoke with told us that staff were generally on time but they were occasions when the management team would inform them if the call was going to be more than 15 minutes late. One person said, "They have always been on time." Where staff were late it was usually down to an emergency within the Court. One person told us, "I have had the odd time when they are held up but they always ring me if it's going to be more than 15 minutes." We found there were sufficient staff to meet people's needs and keep them safe. Staff we spoke with told us there were enough staff to meet the needs of the people and ensure their safety. The registered manager informed us that they continuously recruited for staff, so that they always had sufficient numbers of well trained staff. One person told us, "The girls [staff] are lovely and always ask if I have everything I need and is there anything else I need them to do before they leave." Another person said "they go above and beyond what is expected to make sure I have everything I need before they leave. They will pop back if I need them to." Daily records detailed what had been done during the call included spending time having a chat. One member of staff told us, "I love my job and spending time talking with people is part of it."

Staff confirmed that they did not start to work until their pre-employment checks had been completed. One staff member told us that they had an interview and had to wait for their references and criminal record check to be returned before they could start work at the service. The registered manager told us about the recruitment procedure and showed us the relevant checks that had been completed to ensure that staff were suitable to work with people living in the home.

People who needed staff assistance to take their medicines were supported safely. The provider used a 'medication risk assessment' form which identified the level of support each person required from full support including ordering, collecting and administration to those people who only required prompting. The records were reviewed regularly by the registered manager and any issues identified were followed up as required. Care staff had all received medicines training and have regular medicine competency checks and knew how to provide assistance reflecting people's individual needs and preferences.

Everyone we spoke with told us that the staff all knew how to meet their care and support needs. One person told us, "They [staff] look after me so well, they know exactly what they are doing." Another person said, "The staff get lots of training and they are great at helping me."

Newly recruited staff completed a detailed four day induction training programme before they started work as a full member of the care team. A newly recruited member of staff confirmed this. The registered manager told us, that all new staff would complete a minimum of three shadow shifts but more would be done if required to ensure that the staff member felt confident to work alone. It would also depend on their previous experience. We spoke with a new member of staff who told us they have been given additional support as they had not done care work previously. They said "I have been doing some e-learning and some face to face training and feel it is preparing me well. I feel I am being given lots of support to make sure I am confident before I work alone. "A comprehensive training programme had been developed and included both face to face and eLearning. All staff had been through the new training programme regardless of how long they had worked at the service. The registered manager told us this has ensured that all staff were provided with the same information and had been made aware of any new good practice. The provider had provided bespoke training to ensure staff had the skills and knowledge necessary to support people with particular needs. For example, basic dementia and diabetes.

A detailed record of the training was available and the area manager checked this on a regular basis to ensure all staff had received the required training. 98% of the staff had completed all of the training. Training topics included; medicines, safeguarding and moving and handling and first aid. This ensured that staff had the appropriate skills to support people safely and effectively. A member of staff said, "The training is very good. I have recently done the new induction programme and it was good to get refreshed as things change constantly. I learn something new whenever I do any training, even when I have done it before." Another member of staff said "You are always able to ask for specific training and this will be sorted, we have had a talk on dementia". All staff that have worked for the service over a year confirmed they have received an annual appraisal.

The registered manager informed us that staff received supervisions on a monthly basis, this included face to face meetings, and also spot checks. During the face to face meetings staff had the opportunity to discuss training and development needs as well as any other relevant issues to enable staff to improve their care practices. Spot check were carried out whilst staff were providing care and support to people. Checks included how staff communicated with people and how they administered people's medicines.

Staff had been trained in, and showed a good understanding of, the Mental Capacity Act 2005 (MCA). This 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 people lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. When people first started using the service, the provider assessed each person's capacity to consent to their care and support

and this information was understood by staff and reflected in their practice. One staff member told us, "I work with people who have lost capacity to make some decisions but I always offer them a choice of what to eat or what to wear."

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. The manager demonstrated a good understanding of 'best interests' processes.

Staff worked closely with a range of local healthcare services including GPs and community nurses In doing so, the registered manager went above the core homecare service they were contracted to provide. For example, one person told us, "When I became ill I used my call bell and the manager came straightaway and organised the doctor to come and see me. There is always someone around to help you when you need any support." A community professional was very complimentary about the service and that an excellent relationship had been developed over the few years that the service has been operating.

People that wished to come down to the services restaurant at lunchtime were supported as required. Each person's care plan detailed any particular likes or dislikes regarding food and choices of meals and these were understood and respected by staff. People's daily care notes detailed the support that had been offered and given at mealtimes. Some people who chose to remain at home were helped by staff to prepare their meals where required. All staff had attended food and hygiene safety training.

Everyone we spoke with told us that the staff who worked for the service were caring and kind. One person said, "The girls [staff] are very kind and can't do enough for us." Another person told us, "I have been very lucky coming here the staff are very helpful ad look after you when you need it. I couldn't ask to be in a better place." A third person said, "You need to come here when you are able to make the decision, not wait till your family have to make the decision. They wouldn't be able to choose such a lovely place with great staff. I love it here."

Throughout our inspection we saw the registered manager's commitment to caring for people went far beyond the requirements of its contractual obligations. For example, when a call bell went off they responded promptly even when people only required assistance to go back to their room after lunch. The registered manager and the staff arranged various outings and arranged transport from the local village. People we spoke with told us they looked forward to the outings and meeting up with friends.

The registered manager told us and staff confirmed that they would spend time chatting with people. This happened when staff had completed their visits or if a call had been cancelled due to the person being in hospital or that they had another appointment.

The registered manager when required arranged for people to be put in touch with local churches to help meet their spiritual needs. People clearly appreciated the registered manager's commitment to providing them with more than just personal care and support. One person said, "I am treated as a person, not a number." Another person told us, "The staff are very kind and friendly. If I need some shopping or my medicine collecting they are always very obliging, even though it's not part of their duties."

All staff believed that people were at the heart of the service. They believed in making people's lives as happy as they can. One member of staff said "I am here to make sure people have their needs met in a way they would like. We like to make sure that everyone is safe and they maintain their independence as long as they can." A person said, "They staff always check that I am happy and regularly come and ask me how I am getting on and I am getting the support I need. I can't thank the girls [staff] enough in looking after me, They are wonderful." The registered manager told us the aim of the service is "To employ staff who are caring compassionate, considerate responsible and responsive to our client's needs." One member of staff said, "When I visit people, I like to think they are a member of my family and I treat them with respect and protect their dignity." One person said "I feel they are like my family and its lovely they pop in everyday and sometimes just for a chat. It makes my day." Another person told us, "They always give me choice. Including if I would like a shower as sometimes I don't feel up to it. They don't mind, they let me make my own choices." A member of staff told us, "All the care and support we provide is about what people want us to do for them and ensure we keep them as independent as we can."

The registered manager and the team leader promoted people's independence and encouraged all staff to adopt this approach whenever they assisted people who used the service. A member of staff said, "Anything however small that can promote a person's independence is good. For example being able to make

themselves a cup of tea." Staff support people with cooking and this can reduce the number of calls once a person has gained confidence as well as their independence to do it themselves.

Staff demonstrated that they understood how important it was for people to maintain their independence and they reflected this in the way they delivered care and support. One staff member told us, "We support people to retain as much mobility as possible. We encourage them to walk daily whilst staying with them to provide support and encouragement. Another member of staff said, "We always try and encourage people to do things for themselves especially when supporting them to manage their own personal care. Sometimes it includes spending a little extra time with them but that then can reduce when they are confident they can do it themselves". One person told us, "I likes to do things for myself but can find it difficult at times especially when I first wake. I can wash myself but if I am stuck they [staff] help me. The girls [staff] always encourage me and give me time and never try to do it for me unless I ask."

People also told us that staff supported them in ways that maintained their privacy and dignity One person said, "The staff are very respectful. They would soon know if they weren't!" A staff member told us, "It's really important to help people maintain their dignity. I think how I would feel in that situation and try to do my best for them. When providing personal care I always ensure doors and curtains are closed and use a towel to cover people up." Another member of staff said, "We sometimes need to gain people's trust and some people have difficulty in accepting that they need help as they have always been able to do things for themselves and have never had to ask for help. That must be very hard for people."

The provider was aware of the need to maintain confidentiality in relation to people's personal information. We saw that personal files were stored securely in the service's office and when staff came to discuss people they did this by making sure that the office door was closed and that they spoke quietly so as not to be overheard.

Information on local advocacy services was included in the welcome pack that was given to people when they first started using the service. Information was also available on the notice board in the main entrance to Doddington Court. Advocates are people who are independent of a service and who support people to make and communicate their wishes. The manager told us that no one currently had the support of an advocate, as most had family members who could assist them if required.

The registered manager told us that a care assessment was carried out before they started to provide people with care. This was to ensure that people's needs could be met and that staff had the required skills to meet people's needs. The registered manager or a member of the management team would work with the person and or their relatives where appropriate to develop an individual care plan to meet their needs and preferences. One person told us, "[The registered manager] came and discussed what care and support I needed. I have had it [care plan] reviewed as I needed some extra support when I came out of hospital and we changed my plan. My son was here as well." Another person said, "[The registered manager] discussed with me and my family what care I needed and it has been written in my plan. The girls [staff] look at it when they come to make sure there has been no changes. Although I can tell them if I need them to do things differently, they are wonderful."

The registered manager told us that she tried to match people and staff. They told us that at the initial assessment they tried to identify which member of staff would be most suitable. "This can relate to a person's gender, if the person is quiet or a little louder in their mannerism. And once we get to know people, if I know someone has a favourite member of staff I make sure they get that person as often as possible." One person told us, I had asked to have a member of staff changed as I didn't like the way they provided my care. I am sure that others are happy with them. [The registered manager] sorted this out and now I am very happy with the care I get from the girls [staff]." Another person told us, [the registered manager] came to check that I was happy with the care I was getting. I told them I was not as happy with one of the staff and it was sorted and I now have another member of staff. They are great and very happy in their work." The registered manager explained that it is making sure people are happy with the staff that are providing their care and support

Care plans were person centred, and showed that people's individual preferences had been considered when the care package was developed. There was detailed guidance for staff on how to meet people's personal choices whilst also maintaining their independence as much as possible. For example, one person plan gave staff information about what the person could do for themselves and then what support they needed from the staff. Another person's plan informed staff to 'Ensure that on each visit to ask and or remind them to take their medication.' People's records contained their life histories this helped staff in knowing and understanding people better. It also gave them talking points especially for those people whose memories were not as good as they once had been. A member of staff said, "I found the life histories a great source of information and help me start conversations when I go into to people homes to support them in the care needs." Another member of staff said, "The care files are very important. I always look at them on each visit to find out what support had been provided on the last visit. This would help when I am supporting someone to have something to eat, I can offer them something different." One person said, "A new girl [staff] had a read of my file and then asked me what I wanted before helping me."

Care plans were reviewed and updated regularly by senior staff, involving each person in the process. One person told us, "[The registered manager] comes and goes through the plan with me and makes any changes to the information to make sure I am happy with the support that the girls are providing. My

daughter is involved sometimes if she can be here."

The service was able to respond to people's changing needs. For example, if a person was admitted to hospital, there was an information sheet that included the person's personal information, their medical details and history, a summary of their care plan and a record of previous hospital admissions. In addition to this, following a hospital discharge the registered manager met with the person to go through their plan of care and ensure that any changes to the person's care and support needs were taken into account. For example whether the person may require additional visits on returning to their home.

People told us that there were plenty of activities for them to get involved with. One person said, "They [staff] try to keep you occupied". Another person said, "I do join in with the activities but I do also like my own company". One person said "There's always something to do every day". A notice board showed the range of various activities. These included knit & natter sessions, snooker, coffee mornings and trips out. People told us they really enjoyed the social events and there was always lots of laughter and chatter. One person told us they had arranged art and drawing sessions and people were invited to come along and learn new techniques. A number of people we spoke with confirmed that they enjoyed these sessions. The registered manager told us that an activities co-ordinator was due to commence at the service. They will be part of the care and support team. They will be responsible for looking at the activities on offer and be able to provide some one to one sessions for those people who like to stay in their own home.

The provider had a complaints procedure that outlined how complaints would be addressed. The complaints log at the service that showed they had received one formal in the last year. Where complaints had been made, we found these they had been addressed in accordance with the provider's procedure.

Everybody we spoke with couldn't praise the service enough. One person told us, "I couldn't ask for better I am so glad I came here." Another person said, "They are a brilliant company. [The registered manager] is so nice and you can go to them at any time. They always sort things out and come back to you if necessary". A healthcare professional told us that the service provided was of high quality and that people received the support they required and needed.

It was clear that the registered manager was very well known by the people living at Doddington Court and was respected by everyone who used the service. One person said, "[The registered manager] can't do enough for me. She's very kind and thoughtful. She will always call the doctor for me. She's very good." Another person told us, "[the registered manager] is at my beck and call. She never says no, and will always try to sort things out quickly. If she can't she will always come and tell you what is being done so you are kept informed."

All the management team worked on the floor where needed especially if there was short term absence due to sickness of staff. Everyone received a personal call from a member of the management team to check that people were happy with the service. One person we spoke with said "[the registered manager] always checks up to see we are getting everything we need." Another person said "yes [the registered manager] visit me regularly and we have a chat about the service and she will sort out any problems I have straight away. I once had a problem with my medication and she sorted it out very quickly so I didn't miss taking any, She's wonderful I couldn't ask for better."

The people are at the very heart of the service, the registered manager had a strong commitment to continuous improvement to promote further people's welfare and happiness. The registered manager have employed an activities co-ordinator as part of the care and support team. This was to ensure peoples social needs were met and be able to offer more bespoke social activities both on a one to one basis and group activities.

Staff were complimentary about the registered manager and said that they were very motivated when coming to work and were well supported. All staff we spoke with were committed to achieving the best outcomes for people and ensuring they remained as independent as possible. One member of staff said, "The management support all staff as much as they support the people who use the service." Another staff member said, "I share the same vision in making sure people have the care and support they need in a way they like to receive it and this is why I love my job." A newly employed staff member said, "I was interviewed by the registered manager; they really have a good reputation."

The registered manager demonstrated an open management style and strong values-based leadership of her staff team. She told us, "I have a great team. I would never ask anyone to do anything I wouldn't do myself." The registered manager's approach was clearly appreciated by staff. One staff member said, "She [the registered manager] is always approachable and helpful. Here I feel like a person and that I make a difference to people in making sure their care and support needs are met." Staff knew about the provider's

whistle blowing procedure and said they would not hesitate to use it if they had concerns about the running of the service that could not be addressed internally. One member of staff said, "I have never been afraid to say what I think. Good or bad. I have had to speak to the (registered) manager about poor care and she dealt with it appropriately. That has given me the confidence to know I did the right thing. I always feel listened to."

Staff worked together in a friendly and supportive way. One member of staff said, "There's a happy atmosphere here and we work as a team, offering each other support when needed." Another staff member told us, "I really enjoy working here. It's a job when I look forward to coming to work." There were regular staff meetings and we saw that a wide range of issues were discussed. Examples included; changes in people's visits and training issues and developments. This ensured that staff were given the opportunity to raise any issues or good practice.

The registered manager ensured staff had all the information they needed to support people and were kept up to date with any changes through regular meetings. The effectiveness of the leadership was evident in the teamwork we were told about by relatives, social care professionals and staff. The service had a number of multi- agency working agreements. The registered manager was proactive in arranging multi-disciplinary meetings with health and social care professionals to ensure people received consistent support. People and their relatives confirmed that this worked well and they were invited to attend where appropriate

The registered manager told us in the Provider Information Return about their intention to introduce more regular audits to be carried out by Sanctuary's [the provider] own internal quality team. This would allow for greater impartiality and would allow the opportunity to share best practice. The company have started a mentor programme for managers at all levels, this includes workshops on completing documentation, taking part in inspections at other services and completing audits. This helps to identify any gaps in skills or training.

The registered manager understood their legal obligations including the conditions of their registration. They had appropriately notified us of any significant incidents. There was a strong emphasis on continually striving to improve the service for people. Quality assurance audits were carried out monthly by the registered manager and senior staff carried out regular audits of all aspects of the service to review the effectiveness of the support people received. The registered manager and or team leaders speak with people who receive a care service on a regular basis. The provider made sure actions were followed through, and issues identified in one audit were followed up in the next one to ensure t the necessary improvements had been made.

People had the opportunity to express their views of the care and support they receive at both 'tenants meetings', regular discussions with the registered manager and through the annual survey which is due to be sent out during April 2016.