

Sanctuary Care (UK) Limited

# Guys Court Residential and Nursing Home

## Inspection report

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Date of inspection visit:  
07 November 2019

Date of publication:  
16 January 2020

## Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Requires Improvement 

# Summary of findings

## Overall summary

### About The service

Guys Court Nursing Home provides residential and nursing care for up to 37 people. Situated in Fleetwood, the home has a car park and disabled access to the building. It is a three-storey purpose built home, with a passenger lift to all floors. At the time of the inspection visit there were 27 people who lived at the home.

### People's experience of using this service and what we found

There were issues around safe staffing levels. Comments from people and observations found shortfalls in the level of staff to support people. Although medication administration was satisfactory we found an issue with one person not receiving their medication in a timely manner. People we spoke with told us they felt safe from the risk of abuse. The registered manager recorded and audited any incidents and accidents and learnt from them. Staff continued to be recruited safely Infection control systems and audits continued to ensure a clean environment and reduce any risks.

We have made recommendations about medication and staffing levels, which can be found in the 'safe' section of this report.

The service did not have clear support from the provider and changes had affected the running of the home staff were not supported consistently. The registered manager worked in partnership with a variety of agencies to ensure people's health and social needs were met. The registered manager had improved methods to assess and monitor the quality of the service on a regular basis.

We have made a recommendation about the service and workforce management, which can be found in the 'well led' section of this report.

The registered manager ensured staff received an effective induction and training programme that was continually updated. People spoke positively about the quality of meals and praised the cooks for the choices available. People received support with their healthcare needs. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People we spoke with and our observations confirmed staff were kind, caring, and treated people with respect. Information about local advocacy services was available, to ensure people could access support to express their views if required.

Activities were varied, and people told us there were trips and entertainment regularly provided. Activity co-ordinators were employed to support people and their interests. People's communication needs had been assessed and where support was required this had been given. People knew how they could raise concerns about the service and a complaints procedure was in place.

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

#### Rating at the last inspection

The last rating for this service was requires improvement (published 11 October 2018). The service remains rated requires improvement. This service has been rated requires improvement for the last two consecutive inspections.

#### Why we inspected

This was a planned inspection based on the previous rating.

Follow up: The next scheduled inspection will be in keeping with the overall rating. We will continue to monitor information we receive from and about the service. We may inspect sooner if we receive concerning information about 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?

The service was not always safe

Details are in our safe findings below.

**Requires Improvement** ●

### 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 not always well-led

Details are in our well-led findings below.

**Requires Improvement** ●

# Guys Court Residential and Nursing Home

## **Detailed findings**

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

#### Inspection team

The inspection was carried out by two inspectors and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

Guys Court Nursing Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (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

This inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection, including information from the provider about important events that had taken place at the service, which they are required to send us. We sought feedback from the local authority and Healthwatch Lancashire. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and

social care services in England. We used information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections and we used this to plan our inspection.

#### During the inspection

We spoke with nine people who lived at the home, three relatives, the registered manager and area manager. We also spoke with seven members of staff and the cook. We observed care practices and how staff interacted with people in their care. This helped us understand the experience of people supported by the service.

We looked at care records of two people and arrangements for meal provision. We also looked at records relating to the management of the home, recruitment of a staff member and medicines records of two people. We reviewed the services staffing levels and walked around the building to ensure it was clean, hygienic and a safe place for people to live.

#### After the inspection

We continued to communicate with the provider to corroborate our findings and further information was sent by the provider in response to the feedback provided during the inspection visit.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question remained the same. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

### Staffing and recruitment

- The service was not always staffed sufficiently to ensure people were safe. The passenger lift was being repaired and the registered manager had reacted by increasing staffing levels to compensate for this. However, the increases were not always sufficient to meet people's needs at times when they required it because staff were rushed.
- Staff and our observations during the inspection confirmed this. Comments from staff included, "We Can't always get to residents requesting assistance because we're already dealing with someone." And, "We haven't got enough nurses." A person who lived at the home said, "I would say emphatically no, there are not enough staff on duty. These girls are run ragged."

We recommend the registered manager reviews staffing levels to ensure people are supported in a timely manner.

We discussed with the provider who responded immediately during and after the inspection. The management team confirmed they had reviewed staffing levels and implemented a system for supporting agency nurses. In addition, they had increased staffing levels to ensure people were safe.

- We did receive further comments from people who felt there were sufficient staff to support them and had no issues.
- Staff continued to be recruited safely. The management team continued to ensure checks had been carried out prior to staff commencing employment at Guys Court.

### Using medicines safely

- The registered manager had improved medication systems and procedures since the last inspection. However, we had mixed responses when we asked people if they received their medication on time.
- We found due to staffing levels and lack of permanent qualified nurses instances when people had to wait for medication. For example, one person told us sometimes they were 'a little late' with their medications. Also, another person said, "I have to wait at times."

We recommend the registered manager reviews medication procedures to ensure people receive their medication safely, and at the correct time.

- Staff who administered medicines were qualified nurses with appropriate training. We observed medicines being administered in the lunch time period. One person said, "I get my medication on time, I

would always ask for pain relief if I needed it. I have never been left in pain." A nurse explained they were busy, and support would help ensure medicines were administered safely.

- Room and fridge temperatures had been checked daily and showed medicines were stored at a safe temperature.

Systems and processes to safeguard people from the risk of abuse

- People were safe and protected from abuse and their human rights were respected and upheld. Staff understood their responsibilities around safeguarding people and training was provided for them. A staff member said, "Training is good around safeguarding I have to say that. The company are hot on training. I'm happy in here, I feel safe it's just like home."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager managed risk through their procedures. There were risk assessments to guide staff on safe working practices. These supported staff to keep people safe from avoidable harm and promote independence. For example, we observed safe practices when staff used equipment for people to reduce risk of falling.
- The registered manager reviewed incidents to ensure risks were reassessed to prevent reoccurrence where possible and update any actions that were identified.

Preventing and controlling infection

- The registered manager continued to have safe and effective infection control procedures. Personal protective equipment such as aprons and gloves were available around the building. We saw staff make use of these to ensure correct practices were followed and reduce the risk of infection. One person commented, "They always use those aprons and gloves."
- Staff received training and regular infection control audits were undertaken to ensure standards were maintained.



# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The registered manager and nurses assessed people's needs and preferences in relation to their care. A care plan was developed to ensure their needs could be met. Records were consistent, and staff provided support that had been agreed during the assessment process.
- The registered manager continued referencing current legislation, standards and evidence based on guidance to achieve effective outcomes. For example, the registered manager, nurses team and staff applied their learning in line with current good practice guidelines. This enabled good outcomes for people and supported people to have a good quality of life at Guys Court.

Staff support: induction, training, skills and experience

- Staff were, knowledgeable and continued to carry out their roles effectively. Staff told us they attended training sessions and were supported to develop their skills and access to training was good. One staff member said, "Always been good access to training here it is not a problem." New staff had received induction training. This was confirmed by discussion with a member of the staff team.
- Staff told us they felt supported by the registered manager and received regular supervision and appraisal of their duties.

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

- Staff ensured people's nutritional needs were managed to ensure they received a balanced diet and sufficient fluids to keep them hydrated. Care plans confirmed people's dietary needs had been assessed.
- People were provided with meals and drinks throughout the day. People told us they were happy with the way staff had supported them with meals, snacks and drinks during this time. Comments about the quality of food was positive and included, "The food is brilliant, the menu is always changing, you don't have the same two days running. The choice is wonderful, and the food is good quality." Also, "The portions are big enough and I've never been left feeling hungry. At the moment we've no lift, you can always ask for extra drinks."
- Staff had completed nutritional assessments to identify people's needs and any risks they may have when eating. Where concerns had been identified regarding people's food and fluid intake appropriate action had been taken. This included implementing food and fluid charts to record the amount of food and fluid consumed by people deemed to be at nutritional risk.
- We observed people were supported in a sensitive way when requiring assistance at meal times in the different areas of the home. One person said, "The lift is out but the staff are doing a great job at meal times despite being under pressure and short staffed."

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

- The registered manager continued to work effectively with healthcare professionals to ensure people's healthcare needs were met. People's physical, nursing and mental healthcare needs were documented in care records. This supported staff to identify signs of deteriorating health and take appropriate action.

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

- Accommodation was accessible, safe, homely and suitable for people's needs. Bathrooms could accommodate people who required support with moving and transferring to the bath. The lift was being repaired and the registered manager had taken appropriate action to ensure people were kept safe.
- We saw dementia friendly signage around the building that supported people to mobilise in familiar surroundings.

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 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 when this is in their best interests and legally authorised under the MCA.

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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The staff were knowledgeable about their responsibilities under the MCA and people's rights were protected. The management team had made DoLS applications when required.
- We saw people and their relatives had been involved, consulted with and had agreed with the level of care and treatment provided. Consent to care and treatment in the care records had been signed by people with the appropriate legal authority to do so.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

- People continued to be treated with respect and extreme kindness, by staff who promoted equality and valued diversity. Comments from people confirmed this and included, "I would say they do go above and beyond the call of duty." Also, "I do like the staff, they are very friendly, and we have laugh. They are kind and always treat you with respect."
- The culture of the service was caring, kind and compassionate. This reflected the attitude of staff and registered manager. One person said, "I would say they are kind and compassionate, I've had lots of staff kindnesses, all are good but two are outstanding."
- Staff had a good understanding of protecting and respecting people's human rights. They talked with us about the importance of supporting people's different and diverse needs.
- The service had carefully considered people's human rights and supported them to maintain their individuality. Documents included information of protected characteristics as defined under the Equality Act 2010, such as their religion, disability, cultural background and sexual orientation.

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

- People and relatives continued to be consulted about care and make decisions for their wellbeing. Every effort was made to ensure people and relatives were supported to contribute to their care, so the registered manager and nurses understood their preferences and wishes. This included people who could not communicate verbally. Communication methods such as large print, and other methods of communication were used to support people. This encouraged people to make decisions for their care and understand the support provided.
- There was information available about access to advocacy services should people require their guidance and support. An advocate is an independent person, who will support people in making decisions, to ensure these are made in their best interests.

Respecting and promoting people's privacy, dignity and independence

- People continued to be treated with respect and their dignity was upheld. Many comments and examples confirmed this. A person said, "I couldn't walk when I came in here, but now I can with their assistance. There's always someone there to help you." Also, "They encourage me to be independent. I can go to bed when I want and get up. They listen to me and go the extra mile."
- People and relatives stated staff always engaged with a caring and respectful approach. They added staff were aware of their dignity. For example, one person said, "They always knock on the door before entering and always treat you with respect."

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People continued to receive care and support which was personalised to them. Staff had a knowledge of people they supported. They were familiar with people's likes and preferences including past times, signs of distress and people's individual choices. One staff said, "The core staff have been here a while and know residents well."
- People told us staff gave them choices and they were able to make every day decisions about their care and how they wished to spend their time. This included involvement in regular reviews of care to pass on their views.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager had identified how people needed information to be provided and people's communication preferences and were contained in their care plans.
- Assistive technology was used to good effect, for example with people able to access to WIFI if they wished to, for their phones or computers.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were encouraged to take part in events at the home and develop relationships. The provider employed activity coordinators who supported people to engage in a variety of activities and events.' Relatives and people at the home praised the activity co coordinators and said, "The home has an activities coordinator, she puts on singing, visits to the pub, trips to the Illuminations and Barton Grange Garden Centre." Another person said, "Oh yes, there's plenty to do jigsaws, crochet, crayoning, crafts and card making."

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure which they had followed in response to complaints raised. People knew how to make complaints and felt confident these would be acted upon. The registered manager told us they learnt from complaints or concerns as a positive experience to improve the service. People told us they had no reason to complain and were confident if they did the registered manager would respond.

#### End of life care and support

- The registered manager sensitively documented people's needs and wishes in relation to their end of life support. This included their preferred place of care and regular reviews of their changing health.
- Staff confirmed they had completed end of life training. At the time of this inspection Guys Court was not supporting anyone with end of life care.

# Is the service well-led?

## Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

At the last inspection this key question was rated as Requires Improvement. At this inspection this key question remained the same. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed

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

- Feedback from staff about higher management within the organisation was mixed. All staff told us they felt unsupported by higher management which had left staff morale low. For example, comments included, "No support from head office and demand on carers is high." Also, "Senior management have made it very uncomfortable for staff." People who lived at the home had mixed views.
- Staff felt that they received poor management from the organisation and gave examples, such as, 'only negative comments made to them' and 'no contact between the organisation and staff.'

We made a recommendation the management team seek guidance about the management of the service and workforce support.

- The registered manager received positive comments such as, "The manager is supportive and approachable, a really good manager."
- Some staff told us they felt supported and that concerns were dealt with in a timely way, However this was not consistent throughout the staff team.
- The registered manager and staff delivered effective, safe and appropriate person-centred care. Current and relevant legislation along with best practice guidelines had been followed. This was to ensure the diverse needs of people were met.
- People we spoke with said they were happy with the registered manager and were glad they were living in the home. One person said, "I'm happy here, I've settled down here. I certainly would recommend it."

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

- The registered manager encouraged candour through openness. People told us communication and relationships had been developed between staff, registered manager and people who lived at Guys Court. Relatives told us they were informed if their relative had a fall or accident but were not injured. One person said, "I have a good relationship with [registered manager]."

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

- The registered manager was experienced and was knowledgeable about the needs of the people they supported. Comments from staff confirmed this. One said, "[Registered manager] is very supportive and

knows the residents well."

- Discussion with staff confirmed they were clear about their role and between them provided a consistent service.
- The registered manager had improved systems to regularly assess and monitor the service through audits, and meetings with relatives, staff and people at the home. There was evidence in documentation the registered manager had acted upon findings from audits to improve the service.
- The registered manager understood their legal obligations, including conditions of the Care Quality Commission (CQC) registration and those of other organisations.

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

- The registered manager created an open culture and encouraged people to provide their views about how the service was run. For example, one person said, "I know the name of the manager and senior staff and this place is well managed, we've got everything and extra."
- Relatives and relevant others were regularly involved in consultation about the provision of the service and its quality, relatives and friends confirmed this. Surveys were given out annually to people and relatives for their opinions of the service and these had been sent and they were awaiting responses.

Working in partnership with others

- The registered manager worked in partnership with other organisations to ensure sure they followed current practice, providing a quality service. The service was developing links with health and social care professionals. In addition, the registered manager was working well with relatives in support of people with complex needs. A relative said, "They do respond well to suggestions and work with us."