

Sanctuary Care Limited

# Guy's Court Residential Care Home

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Guy's Court Residential and Nursing Home provides residential 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 12 people who lived at the home.

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

Staff managed people's medicines well. The provider had introduced enhanced control measures in response to the covid-19 pandemic. Staff managed risks well and had plans to follow in case of emergencies. The service had systems to protect people from the risk of abuse and improper treatment. The service was led by a registered manager was described as approachable, well-organised and caring. The culture at the service was open and inclusive. Staff understood their roles and responsibilities. The provider monitored the quality of the service using a range of systems.

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 last inspection

The last rating for this service was requires improvement (published 16 January 2020).

### Why we inspected

This was a planned inspection based on the previous rating.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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 well-led?**

The service was well-led.

Details are in our well-Led findings below.

**Good** ●

# Guy's Court Residential Care 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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

This inspection was carried out by one inspector.

#### Service and service type

Guy's Court Residential and Nursing Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

This inspection was announced. We are mindful of the impact of the COVID-19 pandemic on our regulatory function and we took account of the exceptional circumstances by giving 24 hours' notice.

#### What we did before the inspection

We reviewed information we gained about Guy's Court Residential and Nursing Home, such as feedback from the local authority and professionals working with them. The provider was not asked to complete a provider information return prior to this inspection. 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. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

#### During the inspection

We spoke about Guy's Court Residential and Nursing Home with two people who lived there, a staff member and the registered manager. We looked around the building to carry out a visual check. We did this to ensure the home was clean, hygienic and a safe place for people to live.

#### After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at records related to the management of the service. We did this to ensure the provider had oversight of the home, responded to any concerns and led Guy's Court in ongoing improvements. We looked at training data and quality assurance records. We spoke with four people's relatives and three staff members. We reviewed three people's care records and looked at staffing levels and recruitment procedures.

# 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 has now improved to good. This meant people were safe and protected from avoidable harm.

### Staffing and recruitment

At our last inspection, we made a recommendation to the provider that they should review staffing levels to ensure people were supported in a timely way. During this inspection, we found the provider had acted on the recommendation and made improvements to staffing levels.

- The service was staffed sufficiently. The registered manager based staffing levels on people's needs. People and their relatives told us there were always enough staff on duty. One said, "Staff are always around and they are helpful." A relative told us, "Staffing levels are fine, no concerns there. No complaints from [family member]." Another said, "There are always enough staff now. It's very reassuring." Staff told us they felt there were enough staff deployed to meet people's needs and to keep them safe.
- The provider followed safe recruitment practices.

### Using medicines safely

At our last inspection, we made a recommendation to the provider that they should review medicines procedures, to ensure people received their medicines safely and at the correct time. During this inspection, we found the provider had acted on this recommendation and made improvements to medicines procedures.

- Medicines were managed safely and properly. People received their medicines when they should. Only staff who had been trained, and had their competence assessed, administered people's medicines. Where people were prescribed medicines for use 'when required', staff produced written instructions and information about how and when these medicines could be given to people, to ensure they were used safely.

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

- People were protected from the risk of abuse. People and their relatives told us they felt the service was safe. One said, "I feel perfectly safe here."
- The provider had systems to record, report and analyse any allegations of abuse. Staff had received training to recognise abuse and knew what action to take to keep people safe, including reporting any allegations to external agencies. One staff member told us, "We have training every 12 months, face to face and E-learning. We have policies and contact numbers in the office if we need them. We all know to report any abuse. I would blow the whistle. I've raised concerns in the past."

### Assessing risk, safety monitoring and management

- Staff managed risks to people's safety well. They assessed and regularly reviewed risks to people, to manage any identified risks and keep people safe from avoidable harm. Staff were familiar with people's individual risk management plans.
- The provider ensured the environment and equipment were safe. We saw the premises were suitably maintained and redecoration was ongoing. The provider ensured equipment was inspected and serviced when it needed to be and had plans to keep people safe in the event of an emergency.

### Learning lessons when things go wrong

- The registered manager used a process to learn and make improvements when something went wrong. Staff recorded accidents and incidents, which the registered manager reviewed on a regular basis to identify any trends, themes and areas for improvement. The registered manager also shared details with the provider's management team for analysis. They shared any lessons learned with the staff team, to reduce the risk of similar incidents happening again and improve the safety of the service.

### Preventing and controlling infection

- People were protected against the risk of infection. Staff received training related to infection prevention and control and followed good practice in their work.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

# 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 has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection, we made a recommendation to the provider that they should seek guidance about the management of the service and workforce support. During this inspection, we found the provider had acted and made improvements.

- The registered manager had created a culture that was open, inclusive and put people at the heart of the service. One relative told us, "I would recommend it. They look after [family member] very well. He's more sociable now and healthier. They do little things for him, like getting a paper. The team are very good. I'm happy with everything I've seen." Another said, "The staff approach and relationship we have is really helpful and friendly. We have a really good rapport."
- Staff were well trained and supported to provide person-centred care. They ensured people's needs were met through ongoing review of their care and referenced current legislation and best practice guidance to achieve good outcomes for people. One staff member told us, "Personal choice, that's the big one. You have to put yourself in their shoes. We treat everyone as individuals and respect their wishes." Another said, "The vision and values of the company are all about equality and person-centred care. I think all the staff demonstrate the values that we are taught through training, such as caring, compassion and empathy."

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

- The provider had a policy and procedure which provided guidance around the duty of candour responsibility if something was to go wrong. The registered manager knew how to share information with relevant parties, when necessary. Relatives we spoke with told us they were informed by the registered manager if there were any incidents or accidents involving their loved ones.

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

- The registered manager understood their legal obligations, including conditions of CQC registration and those of other organisations. We found the service was well-organised, with clear lines of responsibility and accountability. The registered manager received a very good level of support from higher levels within the provider organisation.
- The registered manager and staff were experienced, knowledgeable and familiar with the needs of people



they supported. Staff were enthusiastic about their working roles. All staff had a clear understanding of their job roles and how to provide high-quality care. People, relatives and staff were all positive about how the service was managed. Comments we received included, "Since [registered manager] started, it's come on leaps and bounds. She's made a big difference. She's so approachable and enthusiastic. She pays attention to the finer details. For example, the garden is now lovely." And, "[Registered manager] is approachable. Her door is always open. She's fair and listens. She wants to know, and I feel like I can say what I like. She listens and acknowledges any thought and suggestions."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The service engaged with people, others acting on their behalf and staff in an inclusive way. The registered manager used face to face meetings, and satisfaction questionnaires to gain feedback about the service. We saw positive results from the last independent survey.
- The registered manager continually engaged with staff. Staff meetings were held, along with individual meetings with the manager. The provider also used a staff satisfaction survey to encourage feedback from staff about how the service was performing.
- The service worked in partnership with a range of healthcare professionals. This helped to ensure people's needs continued to be met and their wellbeing enhanced.

Continuous learning and improving care

- The provider used a variety of method to assess, monitor and improve the quality of the service provided. We saw they used audits, feedback from people and relatives and staff to identify areas for improvement. Where improvements could be made, the registered manager consulted people and their relatives, so they were involved in shaping how the service developed.