

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 effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Guy's Court Residential Care 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. At the time of the inspection visit there were 30 people who lived at the home.

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

The building was clean and hygienic, and staff were seen to wear appropriate personal protective equipment (PPE). Sufficient care and domestic staff were deployed to meet people's needs. A relative said, "They are having a lot of refurbishment and the staff keep the home very clean despite work going on." Safeguarding training was mandatory, and staff were aware of the processes to follow to enable people to keep safe. Risks were assessed and carefully monitored to ensure individuals safety. Staff were employed following a thorough recruitment process. Staff deployment was effective to ensure people's needs were met in a timely and consistent way. Systems were in place for people to receive their medicines in a safe way.

The aim of the registered manager and staff team was to provide an emphasis on promoting dignity, respect and independence for people supported by the service. People told us they were treated as individuals and received the attention they required. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People's care and support had been planned proactively and in partnership with them. People felt consulted and listened to about how their care would be delivered. Care plans were organised and had identified the care and support people required. Mealtimes were relaxed and organised around people's individual daily routines. One person said, "We have a very good cook who has won an award. The food is excellent and good choices." There was a programme of staff training and regular updates were documented for staff to attend courses on site with the in-house training staff.

We observed staff spent time with people and comments found staff to be patient and caring. One person said, "Cannot fault the staff and manager for their caring and patient way they look after us."

An activity coordinator produced monthly newsletters to promote everyone's involvement in the service and provided meaningful daily activities. There was a distinctive focus on creating a service that welcomed and embraced people's diversity and promoted equality. People were supported to have access to healthcare professionals and their healthcare needs had been met. The service worked in partnership with other organisations to ensure they followed good practice and people in their care were safe. The services had a complaints procedure which was made available to people and their family when they came to Guys Court.

The management team had auditing systems to maintain ongoing oversight of Guys Court and make improvements where necessary. Surveys had been introduced for staff, people and their relatives. The provider was in the process of analysing the results of surveys returned for the registered manager to act

upon any issues that may arise.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The service was registered with us on 20 July 2020 and this is the first comprehensive inspection.

Why we inspected

This was a planned first inspection based on their registration.

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 COVID-19 and other infection outbreaks effectively.

Follow Up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 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 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

The inspection was carried out by one inspector.

Service and service type

Guys Court 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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced. Inspection activity started on 02 November 2022 and ended on 04 November 2022.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and commissioners who work with the service. We also looked at information we had received and held on our system about the service, this included notifications sent to us by the provider and information passed to us by members of the public. The provider did not complete the required Provider Information Return (PIR). This is information providers are required to send us annually with key information about the service, what it does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with six people who lived at Guys Court, two relatives of people, seven members of staff and the registered manager. In addition, we spoke with a visiting professional. We observed staff interaction with people and we also reviewed a range of records. These included care records of people, medication records, one staff file in relation to recruitment and staff training records. We also reviewed a variety of records relating to the management of the service. We had a walk around the premises and looked at infection control measures.

After the inspection

We continued to seek clarification from the manager to validate evidence found. We looked at their quality assurance systems, training records and fire records the registered manager had in place.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staffing and recruitment

- Staff recruitment processes were robust. Pre-employment systems were completed to help ensure suitable people were employed. One staff member confirmed the recruitment process was thorough and helpful.
- There were sufficient staff at the time of the visit to support people's care needs. People we spoke with told us they did not have to wait long if they required help. One person said, "They are always around if needed."

Using medicines safely

- Staff maintained appropriate records for the receipt, administration and disposal of medicines. There were written protocols to guide staff on the administration of medicines prescribed 'as and when' required. We observed medication being administered at breakfast time. We saw people received their medication safely. One person said, "Always get my medicines when I should they make sure of that."
- The management team had good auditing systems and procedures to manage and monitor medicines safely.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and their human rights were respected and upheld. Effective safeguarding systems were in place and staff spoken with had a good understanding of what to do should they witness any signs of people being mistreated.
- Staff told us they had received training in areas of safeguarding adults which was regularly updated. Records confirmed this.

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

- The management team had good processes in place to manage people's safety and reduce risks. Risks to people and the service were assessed and managed well. This helped to protect people's safety.
- The registered manager reviewed incidents as part of lessons learned, to ensure risks were assessed to prevent reoccurrence where possible.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider had processes to admit people safely to the service.
- We were assured that the provider was meeting shielding and social distancing rules.
- 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.
- The provider was facilitating safe visiting in line with government guidance. This meant people could visit their relatives all days of the week in line with government guidance. Indoor visiting was suspended during the COVID-19 outbreak other than in exceptional circumstances; essential care givers were able to continue to visit indoors.

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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- People's needs and choices were assessed to ensure their care, treatment and support was delivered in line with current legislation, standards and evidence-based practice to achieve effective outcomes. Assessments from health and social care professionals were also used to plan effective care. The views of people were also considered, care records evidenced this.
- Care plan records contained a full assessment of people's needs. Following the assessment, the service had provided a caring approach towards providing person-centred care. Care records were consistent, and staff provided support that had been agreed with each person. One person said, "No problem with my treatment here the staff know what they are doing." Care records were regularly reviewed and updated monthly or when people's needs changed.

Staff support: induction, training, skills and experience

- Training records showed staff had received training that was relevant to their role and enhanced their skills. Staff spoken with confirmed this.
- We found all staff had achieved or were working towards national care qualifications. In addition, staff completed the services mandatory training. This ensured people were supported by staff who had the right competencies and knowledge.
- A thorough induction process was in place when staff commenced work. Staff told us it had provided a good first understanding in care, familiarisation with processes in the home and the expectations of the registered manager. One staff member said, "My induction was completed over two days and was very thorough. I felt it covered everything to support me to undertake my role effectively."

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People were supported with their healthcare needs. Staff had developed relationships with other agencies and professionals to provide a flexible and effective service.
- People were provided with meals of quality and choice. Comments from people were positive and included from a relative, "They provide excellent food." Also, people said, "Excellent." And, another person said, "Too much sometimes but really good with the cook making homemade cakes."

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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.

- Staff had received training and understood the relevant requirements of the MCA. Staff confirmed they asked for people's consent before providing support, explaining the reasons behind this and giving people enough time to think about their decision before taking action.
- People's capacity to make decisions was considered as part of the assessment process. We saw evidence of this in care plans.
- The registered manager knew the process to submit applications for DoLS authorisations, as appropriate.

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. People were able to navigate around the building using corridors which were kept uncluttered and they had lift access to other floors. People had access to an enclosed rear garden, where they could enjoy outdoor space. People said they had enjoyed the use of this space in the warm weather.
- People were able to bring their own items into their rooms and to personalise their rooms as they wanted to. Rooms we visited confirmed this.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- Staff treated people with care, patience, respect and kindness. We observed staff sat chatting with people in a relaxed atmosphere. One relative said, "The staff have so much patience and are able to sit and spend time with people that's what I like about here." Staff told us they were encouraged by the registered manager to spend time with people. One staff member said, "[Registered manager] encourages us to put the residents first always that's why it's such a good home."
- The management team concentrated on promoting being open and honest and encouraging meaningful relationships with people. People told us the home had a family atmosphere.
- Staff knew about people's preferences and diverse needs and respected what was important to them.

Respecting and promoting people's privacy, dignity and independence

- Staff supported people to maintain their independence. The staff team were knowledgeable about accessing services and ensuring people could have equipment and adaptations to keep them safe and to promote independence.
- The service ensured people's care records were kept securely. The language used in daily notes and care records was respectful and recorded in a positive manner.

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

- People were provided with information that enabled them to make decisions about their lives. Staff understood the importance of empowering people to make decisions if possible.
- Evidence of consent obtained from people were written in care records we looked at.
- If people could not make day-to-day decisions, information was available about advocacy services. This meant people had someone who could speak up on their behalf if relatives or friends were unavailable.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. 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's care and support was centred around their individual preferences and how they wanted to spend their time. Staff supported people whilst promoting equality and diversity and respecting people's choices. One person said, "I know I am old, but the staff do show me a lot of respect and listen to what I have to say."
- The registered manager and staff developed person-centred care plans to help people to meet their requirements and preferences. Those we spoke with confirmed they were involved in this process, including reviews of their care.

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.

- Records detailed where the individual had communication needs and what staff should do to support them.
- Staff understood each person's communication needs, including where people needed extra support with speech, hearing, sight or understanding. This information was written in people's care plans.

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

- Guy's Court employed an activity coordinator who organised a variety of activities both individual and group events. In addition, a 'newsletter' was provided for people with all that was going on in the home that month. One person said, "I enjoy the read of the newsletter and I know what events are happening. It's really good." Another said, "[Activity coordinator] is fantastic they get everyone going." We observed people joining in with a sing song and dance at the time of our visit. A relative said, "Yes every time I come there is always something going on."
- Staff encouraged people to maintain relationships and follow their interests. Staff help support people to facilitate trips and activities. We also saw evidence visits by friends of relatives were in accordance with safety guidance.

Improving care quality in response to complaints or concerns

- People had access to a complaint's procedure. The procedure was clear in explaining how a complaint could be made and reassured people their concerns would be dealt with. No complaints had been received.

End of life care and support

- Where appropriate end of life plans were put in place and staff had appropriate training. Training documents looked at confirmed this.
- Staff and the management team discussed and recorded people's end of life care wishes and understood what was important to them. There were arrangements in place to ensure necessary medicines and additional healthcare support was available when required.

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- Everyone we spoke with described a very positive, caring, relaxed environment. One person said, "Everybody from the manager to the cleaners are fantastic. They make life comfortable and are so kind and thoughtful." A relative added, "[Registered manager] is full of character, a real genuine person who cares passionately about the residents."
- Staff also were very complimentary about the registered manager in terms of support and attitude. One staff member said, "[Registered manager] is so supportive and cannot do enough for people."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; 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 management team had systems in place to monitor the performance of the service, in terms of audits and quality assurance systems. These included surveys which had recently been distributed to people and they were in the process of being analysed. The registered manager had systems in place to address any issues or shortfalls to improve the service for people.
- The management team encouraged candour through openness. The staff structure enabled people to be clear about their roles, and understanding of quality performance, risks and regulatory requirements.

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

- Relatives told us they were consulted and updated on family members care and recent surveys were given to them for completion.
- Staff told us they could contribute to the way the service was run through team meetings and one to one support meetings with the registered manager. One staff member said, "We are lucky to have the support from a registered manager who listens to people and is keen to get opinions from us."

Working in partnership with others

- Records highlighted advice and guidance was sought from health and social care professionals when required.
- The management team worked closely with other agencies and relatives to share good practice and enhance care delivery. One relative said, "I speak on a regular basis with [registered manager] about care

and things."