

Sands Care Morecambe Limited

The Sands Meadows

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

The Sands Meadows is a care home providing accommodation and personal care to 23 people who are living with dementia. There were 23 people living in the home at the time we inspected. The home is an adapted building in a residential area.

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

People received safe care from kind and caring staff. People were protected from the risk of harm and staff supported them to maintain their safety and wellbeing. People received their medicines as prescribed from staff who had been trained in medicines and had their competencies checked by managers. Relatives told us they felt confident their relations were safe living in the home and praised the friendly and caring attitudes of staff and managers. People's rights were protected and their equality and diversity needs were respected. People's bedrooms were personalised to reflect their tastes and preferences.

People were confident in the management team at the home, and praised how approachable they were. Relatives were similarly pleased with the way the home was managed. People received high-quality person-centred care because the provider and managers had maintained effective oversight of the quality of care practice and records. Staff were committed to providing high-quality care and felt they were supported in their role by managers. Relatives felt they were kept up to date with any matters affecting their relations.

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.

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

Rating at the last inspection and update

The last rating for this service was requires improvement. (published 20 January 2022. There was a breach of the regulations. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Sands Meadows on our website at ww.cqc.org.uk.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led

Details are in our well-led findings below

The Sands Meadows

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 Health and Social Care Act 2008.

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 completed by one inspector 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

The Sands Meadows is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. The Sands Meadows is a care home without nursing care. 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. The registered manager was on extended leave. The deputy manager was managing the home until their return.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed the information we had received since the last inspection. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

During the inspection

We spoke with four people who lived in the home. We spoke with the relatives of 8 people. We spoke with three staff, the deputy manager and senior care staff. We received feedback from a further three staff who completed questionnaires. We reviewed a range of records which included; the care records of five people, several medicines records, health and safety records, audits of care records and practice and staff meeting minutes.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection we found people's medicines had not been managed safely. This had been a breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008. At this inspection, we found enough improvement had been made and the provider was no longer in breach of regulations.

- People received their medicines from trained staff whose competencies had been checked.
- The provider's medicine management policies were followed by staff which helped ensure medicines were stored and administered safely.
- A new electronic medicine records system had been fully embedded. Staff were alerted if medicines were late and if the time between doses was too short.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People we spoke with told us they felt safe living in the home. Relatives we spoke with confirmed this.
- The provider's safeguarding procedures and policies were understood and followed by staff. Safeguarding records were thorough and showed how lessons were learned to avoid reoccurrence.
- Staff understood what a safeguarding concern might be and how to raise this both within the organisation and with external agencies.
- All incidents, including falls, injuries and similar events had been recorded and looked into to identify any possible lessons to be learned.

Assessing risk, safety monitoring and management

- People were protected from risks because the provider's risk management policies and procedures were robust and followed by staff.
- Care records included up-to-date risk assessments in relation to people's health and wellbeing. Risk assessments and management plans had been reviewed and updated regularly.
- Risks to people's rights had been considered.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- The provider had followed their robust recruitment procedures which helped ensure people were recruited safely.
- Staffing levels were maintained at the level assessed as safe by the provider. Staff told us they had enough time to support people. We observed staff taking time and interacting with people.
- Relatives said staffing could sometimes appear a little low at weekends however they were confident staffing levels were safe.

Preventing and controlling infection

- The home was clean and tidy. Communal areas and people's bedrooms were clean.
- Personal protective equipment was available throughout the home.
- The provider was following current government guidance in relation to COVID-19.

Visiting in care homes

- Relatives told us they were able to visit their relations with ease.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed 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

- The service was well-led by the registered manager and their team who were committed to achieving good outcomes for people.
- Relatives told us they were confident in the management team. Comments included; "Yes the atmosphere is really friendly, and the staff seem to be really in control everyone is cared for in a caring way." And, "Yes the staff work well together as a team and they help each other. The atmosphere is lovely and quiet, people seem happy."

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 effective policies in place to ensure they met their duty of candour obligations. Both the registered manager and the deputy manager were aware of their responsibilities and ensured these were met.
- Notifications of reportable incidents had been submitted to the relevant agency, including CQC, Public Health and the Health and Safety Executive.
- Relatives told us they had been kept up-to-date by staff of any incidents involving their relation. Comments included; "They keep us informed recently she was unwell and was taken to hospital and they kept us informed." And, "I generally hear [name] has had a fall or treatment for a condition the staff let me know what's happening."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Managers were clear about quality and ensured they had good oversight of the service, care practice and care records. Audit records showed where issues had been identified they had been addressed and followed up.
- Staff understood their roles and the quality of care expected of them. Staff felt supported and respected by the management team.
- The provider and management team kept up-to-date with best practice guidance and reviewed and updated policies and procedures to promote ongoing improvements in the quality of care.

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

- The provider had systems in place to engage with people living in the home, their relatives and staff. These included a newsletter, surveys and events.
- People living in the home told us they could speak with staff and managers and raise anything they wanted with them. Relatives praised the approachability of the management team and found staff easy to talk with.
- Staff told us they found the new electronic devices helped them to keep up-to-date and in touch with what was happening. This was identified as particularly useful when staff had been unable to attend regular team meetings.

Working in partnership with others

- The management team and staff continued to work in partnership with other agencies and professionals which helped ensure people received consistent quality care.
- The deputy manager and other staff present during the inspection worked professionally and effectively with the inspection process.