Sanctuary Home Care Limited

Shaftesbury Court (High Street)

Inspection report

High Street
Winslow
Buckinghamshire
MK18 3HA

Tel: 01296714858

Date of inspection visit:
01 March 2017

Date of publication:
06 April 2017

Ratings

Overall rating for this service	Good
Is the service safe?	Good

Summary of findings

Overall summary

This inspection took place on 1 March 2017. It was an unannounced visit to the service.

Shaftesbury Court (High Street) is a care home for adults who have learning disabilities and or autism. It is registered to provide accommodation for 18 people. At the time of our inspection 16 people lived at Shaftesbury Court (High Street).

We previously inspected the service on 4 and 8 December 2015. The service was rated as good overall at the time. However we had concerns about staffing levels and how staff were deployed. We issued the provider with a requirement to improve. The provider sent us an action plan which outlined what changes the service had planned to improve staffing levels. This inspection was a focused visit to check what improvements had been made. We only looked at evidence to ask if the service was safe.

The service had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, 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.

Shaftesbury Court (High Street) accommodation is split into four sub flats. Each flat has individual bedrooms, which were personalised and homely.

We found improvements had been made regarding staffing levels. The deputy manager advised us changes had been made to staff contracted hours, which had helped the service to be more flexible with covering shifts. Staff confirmed there had been improvements in the number of staff on duty.

Potential risks to people had been assessed and measures were in place to minimise these. The home was well maintained and where required equipment and appliances were regularly serviced.

People were aware of who they could talk to if they were concerned about their safety. Staff were aware of how to recognise abuse and had responded appropriately when concerns had been raised.

People received their medicines when required and risk assessments were in place to ensure people received their prescribed medicines safely.

Staff were aware of when to report any accidents or incidents and the registered manager and provider monitored events within the home to help prevent future incidents.

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.

There were sufficient and suitably qualified staff to ensure people's safety.

People were protected from harm because staff received training to be able to identify and report abuse. There were procedures for staff to follow in the event of any abuse happening.

Potential risks to people were clearly identified and actions to manage them were available to all staff. Risk assessments were reviewed regularly.

Shaftesbury Court (High Street)

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 provider is 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 1 March 2017 and was unannounced; this meant that the staff and provider did not know we were visiting. The inspection was carried out by one inspector.

Before the inspection the provider was not asked to complete a Provider Information Return (PIR). The PIR is a form that the provider submits to the Commission which gives us key information about the service, what it does well and what improvements they plan to make. We reviewed notifications and any other information we had received since the last inspection. A notification is information about important events which the service is required to send us by law.

We spoke with five people living at Shaftesbury Court (High Street) who were receiving care and support, the registered manager and deputy manager, we contacted four care staff after the site visit. We checked three people's medicine records against stock levels. We reviewed three staff recruitment files and four care plans within the service and cross referenced practice against the provider's own policies and procedures.

Good

Is the service safe?

Our findings

At the previous inspection carried out on 4 and 8 December 2015, we had concerns the service was understaffed and the deployment of staff did not always provide safe care. The provider was asked to ensure improvements were made. They sent us an action plan telling us how they intended to improve staffing levels. At this inspection we checked what improvements had been made.

We found the staffing levels had improved since our last visit. The deputy manager advised us some staff had received increased contracted hours, which gave the service more flexibility in covering shifts. People told us they thought there were enough staff on duty. We observed practice throughout the day. We found staff were able to respond to people needs in a timely way. One person requested some fizzy drink. They were supported to go to the local shop to buy some. Where new staff had been appointed we could see on the rota they were not included in the main staffing numbers and worked alongside more experienced staff. The home had used agency staff to cover some shifts. We acknowledged the home sought confirmation from the agency about temporary staff's qualifications and criminal record status. The deputy manager told us they always provided an induction to agency staff and sought to use the same member of staff to ensure they were knowledgeable about people's needs.

The service operated robust recruitment processes. Pre-employment checks were completed for staff. These included employment history, references, and Disclosure and Barring Service checks (DBS). A DBS is a criminal record check. The registered manager advised us they have an on-going advertisement for new staff.

People told us they felt safe living at Shaftesbury Court (High Street). One person told us "I feel safe here, I can lock my door." Another person told us they would speak to staff in the office next door if they were worried about their safety. We noted people had information available to them in pictorial and easy read formats on how to keep safe.

Staff had access to training on how to recognise abuse and what to do in the event of a safeguarding concern being raised. The registered manager was aware of their responsibilities to report safeguarding concerns to the local authority and to CQC.

Risks posed to people as a result of their medical or physical condition had been assessed. The service used a risk identification tool to assess when a risk assessment was required. This meant the risk assessments completed were person centred. For instance where people had been identified as high risk of choking a risk assessment was in place. We checked a person's risk assessment for choking and we observed staff undertook the actions described in the care plan to ensure the person was not placed at risk while eating. We observed risk assessments were also conducted for assisting people move position and mobility.

Risk assessments were completed as soon as a concern was raised. For instance an incident had occurred whilst a person was travelling in a taxi. We noted a new risk assessment had been written and staff were aware of the content.

Environmental risks were assessed and managed. For instance a fire risk assessment was undertaken on 19 September 2016, and a water hygiene risk assessment was undertaken on 18 January 2017. We noted health and safety issues were talked about with people who lived in the home in house meetings. The provider monitored health and safety at regular visits to the service.

Each person had a personal emergency evacuation plan. This detailed the support they required in an emergency. We spoke with people about what they would do in the event of a fire. People were aware of what to do if a fire occurred, such as stay behind a fire door or await instructions from staff.

People were supported with their medicines when required. Staff had received training on how to administer medicines in a safe way. The deputy manager advised us the service had made some changes to the records relating to medicine management. We checked three people's medicine stock levels and medicine administration records (MARs). We found the records were well maintained and accurate. The service had a pharmacy audit conducted on 21 December 2016. The audit found the service operated safe practices around medicine storage and administration. People told us they received their medicine when required. People told us staff explained to people what the medicine was. One person told us "I have to take white liquid as I have indigestion."

Where people were prescribed medicines as required (PRN), staff had additional information available to them to ensure they knew when and why to give the medicine. Risk assessments were in place for the management of medicine. For instance one person had epilepsy recovery medicine which they needed to take with them when away from the home. A risk assessment was in place to ensure this was always provided.

Accidents and incidents were reported; the provider had an electronic system which held information about events that had happened. Staff were of when to complete an accident report. The registered manager and the provider monitored accidents and incident to look for trends and ways of preventing future events.