

Sanders Senior Living Limited

Eve Belle

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

Eve Belle is a residential care home providing the regulated activity of personal care to up to 58 people. The service provides support to older people and people who are living with dementia in one adapted building. At the time of our inspection there were 27 people using the service.

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

Suitable arrangements were in place to keep people safe. Policies and procedures were followed by staff to safeguard people and staff understood these processes. Risks to people were identified and managed to prevent people from receiving unsafe care and support. Medicine arrangements ensured people received their prescribed medication and staff's practice was safe. The service was appropriately staffed to meet people's care and support needs. Recruitment procedures were followed to ensure the right staff were employed to care for vulnerable individuals. People were protected by the providers arrangements for the prevention and control of infection. Arrangements were in place for learning and making improvements.

Staff received appropriate training opportunities. Suitable arrangements were in place for staff to receive regular formal supervision. The dining experience was positive, and people's nutritional and hydration needs were met. The service ensured people received appropriate healthcare support as and when needed from a variety of professional healthcare services. All areas of the environment were maintained and decorated to a very high standard. The space was maximised to ensure there were quiet areas, room for activities and areas for people to sit with their visitors. The service worked together with other organisations to ensure people received coordinated care and support. 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 were treated with care, kindness, dignity, and respect. People received a good level of care and support that met their needs and preferences. Staff had a good knowledge and understanding of people's specific care and support needs and how they wished to be cared for and supported. The rapport between staff and people using the service was positive. Individuals had a support plan in place describing their specific care and support needs; and the delivery of care to be provided by staff.

People's social care needs were met. Complaints were investigated and managed. Robust arrangements were in place to assess and monitor the quality of the service provided. There was a positive culture within the service that was person-centred, open, and inclusive. Relatives and staff were very complimentary regarding the registered manager and acknowledged they were an excellent role model, leading by example.

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

Rating at last inspection

This service was registered with us on 2 August 2022 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 ●

Eve Belle

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

The 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

Eve Belle 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. Eve Belle 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.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We sought feedback from the Local Authority and professionals who work with the service. We used all this information to plan our inspection.

During the inspection

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with 7 people who used the service and 9 relatives about their experience of the care provided. We spoke with 6 members of staff, the registered manager and deputy manager. We also spoke with the provider's regional operations manager for Eve Belle. We reviewed 2 people's care files in full, 4 people's care files relating to specific topics and 3 staff personnel files. We also looked at a sample of the service's quality assurance systems, the provider's arrangements for managing medication, staff training and supervision records, complaint and compliment records.

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 of this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. One person told us, "I do feel safe, I have my buzzer [call alarm]. Staff, they come quite quick. They may say I'll be back in 5 minutes, but they do come back to check on me." A second person told us, "I feel safe in the hands of staff."
- A relative told us they had been due to visit their family member but due to unforeseen circumstances could not. A member of staff contacted them to tell them their family member was anxious about their whereabouts as they thought they had had an accident. The staff member handed the telephone to the person using the service so they could speak to their relative and be assured of their safety. The relative told us, "I feel very reassured they are in safe hands."
- Staff demonstrated an understanding and awareness of the different types of abuse, how to respond appropriately where abuse was suspected and how to escalate concerns about a person's safety to the management team and external agencies, such as the Local Authority and Care Quality Commission. Staff told us they would not hesitate to raise a safeguarding alert if they suspected abuse.
- The registered manager was aware of their responsibility to notify us and the Local Authority of any allegations or incidents of abuse at the earliest opportunity.

Assessing risk, safety monitoring and management

- Risks to people's safety and wellbeing were assessed and recorded. These identified how risks to people's safety and wellbeing were to be reduced and the actions required to keep people safe.
- Risks presented by COVID-19 had been identified for people using the service and staff employed at Eve Belle.
- Environmental risks, for example, those relating to the service's fire arrangements were in place and these included individual Personal Emergency Evacuation Plans [PEEP] for people using the service. Appropriate fire detection, warning systems and firefighting equipment were in place and checked to ensure they remained effective. These ensured the provider was able to respond effectively to fire related emergencies that could occur at the service.

Staffing and recruitment

- The deployment of staff was appropriate and there were enough competent staff on duty to meet people's needs and to ensure staffs' practice was safe. Relatives and staff told us there were enough staff available.
- The service used a formal tool to assess people's dependency needs and this was used to inform the service's staffing levels.
- Staff recruitment records for 3 members of staff were viewed. Appropriate checks were completed before a new member of staff started working at the service. This included an application form, written references, proof of identification and Disclosure and Barring Service [DBS] checks. DBS checks provide information

including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Medication practices ensured the proper and safe use of medicines in line with good practice standards and relevant national guidance.
- Accurate medicines records were maintained, and people received their medicines as prescribed.
- The medication rounds were evenly spaced out throughout the day to ensure people did not receive their medication too close together or too late. Observation of staff practice showed staff undertook this task with dignity and respect for the people being supported.
- Staff who administered medication were trained and had their competency assessed to ensure they remained competent to undertake this task safely.

Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was supporting people living at the service to minimise the spread of infection.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely. Staff confirmed they had enough supplies of PPE at all times. Staff were observed to put on, take off and dispose of used PPE in line with guidance.
- We were assured the provider was responding effectively to risks and signs of infection.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

Visiting in care homes

- Relatives were able to visit their family member without any restrictions imposed and in line with current government guidance. During both days of inspection we observed a steady flow of visitors to Eve Belle, including adults, children and dogs.

Learning lessons when things go wrong

- Effective arrangements were in place to learn when things went wrong.
- Where safeguarding concerns and complaints were raised, a robust review of the matter had been undertaken to ensure lessons were learned to support future improvement.
- Accident and incidents were logged and analysed to identify potential trends and themes. This was to mitigate risks and ensure people's safety and wellbeing needs were met.

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 were assessed prior to their admission to the service. Relatives confirmed they had participated in this process.
- People's protected characteristics under the Equalities Act 2010, such as age, disability, religion and ethnicity were identified as part of their need's assessment. Staff knew about people's individual characteristics.

Staff support: induction, training, skills and experience

- Staff had received mandatory training in line with the organisation's expectations. Staff told us this consisted of both face-to-face and e-learning.
- Staff received an induction when newly appointed to the organisation. Staff were given the opportunity to 'shadow' more experienced staff to ensure they understood the routines of the service and to understand their roles and responsibilities.
- Staff confirmed they received formal supervision and it was a two-way process. Staff told us they felt supported and valued by the registered manager and senior management team. Comments included, "I do feel very supported and the registered manager is always thanking and praising us for the work we do, it is very much appreciated" and, "I feel supported, 100%."

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

- There was a strong emphasis on the importance of eating and drinking well.
- People's comments about the quality of the meals provided were positive. Comments included, "The food is above boarding school standard", "The food is good, there is plenty of choice, lots of fruit and vegetables" and, "The food always tastes good. I get plenty of drinks and I can always ring for one."
- The dining experience for people was very positive. People were offered different options of food and drink at each meal. Meals were well presented, considering people's individual food and dining preferences. For example, if they liked a big or small plate of food, favourite food items and if they required specialist cutlery.
- Where people required staff assistance this was provided in a respectful and dignified manner. People were not rushed to eat their meal.
- Where people were at risk of poor nutrition, their weight was monitored at regular intervals and appropriate healthcare professionals, such as dietician and Speech and Language Therapy Team [SALT] were consulted for advice and support. A relative told us their family member when first admitted to the service was losing weight. Initially the person received 1 to 1 support and encouragement to eat. As a result of staff's efforts, the person no longer required that level of support and ate in the communal dining room.

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

- Staff worked well with other organisations to ensure they delivered good joined-up care and support.
- People's healthcare needs were met, and they received appropriate support from staff. Records demonstrated people were supported to attend medical appointments, for example, to the GP, hospital, and other healthcare services.
- Relatives told us they were kept informed of their member of family's healthcare needs and the outcome of any healthcare appointments. Comments included, "I am always kept up to date with what is happening" and, "I am informed about [relative] healthcare needs, it means I do not have to worry or keep asking staff, information is willingly provided."
- Relatives confirmed staff were responsive to their family member's healthcare needs. One relative told us their family member had recently not been well again and on both occasions a GP had been contacted at the earliest opportunity.

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

- The service was decorated and furnished to a high specification, with top of the range furnishings and calming colour schemes.
- There were different areas available for people to use for their preferred activities. Each floor had its own communal lounge and dining area. The service had a 6-person cinema, hairdressing salon, spa and its own bistro café equipped with a bar area.
- Private spaces were scattered throughout the service to enable people to spend time with their families, visitors, or to have time alone. There was a choice of seating within the communal lounge, arranged in small clusters to enable and encourage people to engage in conversations with others. The environment was 'open-planned' to enable people to walk around independently.
- People had personalised rooms which supported their individual needs and preferences. This included an en-suite with walk-in wet room to aid independent living. Assisted bathrooms were available for people who preferred a bath and/or required help with personal care.
- Age appropriate points of interest, for example, photographs and artwork were displayed for people to see.

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 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 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff ensured consent was always sought and people were involved in making decisions about their care so that their rights were upheld.

- People's capacity to make decisions had been assessed and these were individual to the person.
- Staff demonstrated a good understanding and knowledge of the key requirements of the MCA and how this impacted on people using the service.

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

- People received support from staff that ensured they were treated with care and kindness; and their care was person-centred.
- People's comments about the quality of care were positive. One person told us staff knew them well and spent time listening and talking to them. Other comments included, "I can have a laugh and joke with staff", "The staff are very good, helpful and check on me at night" and, "Staff are very kind and help me as I am partially sighted."
- Relatives confirmed they were happy with the care and support provided for their family member and that staff were kind, caring and attentive. Comments included, "The atmosphere is open and warm, it does not feel like a care home", "[Relative] has settled very well, staff cannot do enough, the care is really good" and, "It is a lovely home, everyone is very caring and helpful. It is amazing, [Relative] is looked after very well."
- Observations demonstrated people received appropriate care and had a good rapport and relationship with the staff who supported them. The atmosphere during the inspection was seen to be welcoming, comforting, cheerful and lively.

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

- At the time of inspection Eve Belle had been operational since August 2022. People and those acting on their behalf had not yet been given the opportunity to provide feedback about the service through the completion of questionnaires. The registered manager confirmed this would be initiated now that the service had been open for 6 months.
- People and those acting on their behalf had been given the opportunity to attend family meetings.

Respecting and promoting people's privacy, dignity, and independence

- People were supported by staff to maintain their independence. Information from people's daily care notes demonstrated people were supported to complete their own personal care tasks where appropriate and to maintain their independence with eating and drinking. One person was able to access the local community independently using their mobility aid.
- Relatives spoken with told us their family member was always treated with respect and dignity.
- People were supported to maintain their personal appearance to ensure their self-esteem and sense of self-worth. People's clothing was colour coordinated and people were supported to wear items of jewellery.

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; End of life care and support

- People who used the service had a support plan in place describing their individual care and support needs; and the delivery of care to be provided by staff.
- People received good personalised care and support that was responsive to their needs. Staff demonstrated a good understanding and knowledge of people's individual care and support needs, including their individual likes, dislikes and preferences.
- The registered manager confirmed 1 person was assessed as being at the end of their life. The person's care plan recorded their decisions about their preferences for end-of-life care. Information demonstrated the service worked with healthcare professionals, including the local palliative care team. This was to ensure this person received a dignified and pain-free death that was as comfortable as possible.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Care plans had communication records in place to guide staff on how best to communicate with the people they supported.
- The activity programme was in an easy read and pictorial format to enable people with a disability and/or living with dementia to understand the information. Consideration should be made to provide this in a large print format to assist people who have an impairment with their vision.

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 supported to maintain relationships that were important to them, for example, with family members and friends.
- The service had a dedicated wellbeing lead to facilitate social interaction and activities for people living at Eve Belle. People and those acting on their behalf were given and/or had access to the weekly activity planner, so they knew what was happening at the service each day and throughout the week.
- People were supported and encouraged to participate in social activities. A local school visited every Monday to read to people and complete art and crafts. A local games club visited, and people were able to enjoy playing a board game and/or cards. On Wednesday's people were able to bake, and on the second

day of inspection there was a cup cake decorating competition.

- Observations demonstrated people were supported to attend the walking club, to go shopping and enjoy local cafes for refreshments. People were encouraged to remain physically fit and were encouraged to participate in regular exercise to music, with 'Eye of the Tiger [theme to the film Rocky] a particular favourite, whilst shaking pom poms. This was led by the registered manager. On the second day of inspection 16 people who lived at Eve Belle, 6 staff and 1 relative took part.

Improving care quality in response to complaints or concerns

- The service had a complaints procedure in place for people to use if they had a concern or were not happy with the service. Since Eve Belle had been operational, the service had received 1 complaint. This was investigated in an open and transparent way.
- A record of compliments was maintained to capture the service's achievements.
- A record of compliments relating to the quality of care people received at Eve Belle was also recorded on a well-known external website. In the 6 months prior to our inspection 14 reviews submitted by people's relatives had awarded the service a maximum of 5 stars for their overall experience.

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; Continuous learning and improving care

- The service had a positive culture which ensured the care provided to people using the service was person-centred, open, inclusive, and focused on people's individual care and support needs.
- The quality assurance arrangements monitored the experience of people being supported through its internal auditing processes. This information was used to help the provider and manager drive improvement, including the monitoring of trends and lessons learned each month.
- Robust arrangements were in place to examine and analyse key data relating to falls, accident and incidents, weight monitoring and pressure area care. The registered manager was advised to include the monitoring of infections.
- People and their relatives were positive about the service. One relative told us, "[Family Member] has got their independence back, got their quality of life back, sits in the communal areas and has been singing, music interests them again. They have got a quality of life here, which they did not have at home."
- Staff were positive about working at the service and told us they enjoyed coming to work. Comments included, "I love it here, [Registered Manager] is brilliant and a very good role model and leader. They are always out on the floor helping, even makes the tea" and, "I'm not just saying it, Eve Belle is a great place to work, I love coming to work. [Registered Manager] is fantastic, they are born with a gift, great leadership skills, effective and professional."

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 duty of candour policy and procedure and understood their responsibility to be open and honest if something went wrong.
- The registered manager was fully aware of their legal responsibilities and was open and transparent. They submitted statutory notifications to us for significant events that had occurred at the service, for example accidents and incidents.

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

- The registered manager understood the importance of their role and responsibilities. They demonstrated a commitment to providing good care for people using the service, providing support to staff employed within the service and ensuring compliance with regulatory requirements was attained and improvements made when things went wrong.

- Staff were complimentary regarding communication arrangements at the service and about the management team. Staff told us they were confident to raise concerns and felt these would be acted upon and addressed by the registered manager.
- People, relatives, and staff were complimentary regarding the registered manager and senior management team, signifying the service was well managed and led.
- The management team led by example, they were highly visible and known to staff and relatives. Comments included, "The manager presents well, they do not just sit in the office. They come out and put their arm around them [people who use the service]. The manager is loving and supportive and encourages their staff by example", "This care home should be a benchmark for people in care and for all homes" and, "The staff are brilliant. The manager is very much a presence in the home, got an open door and very hands on."

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

- Engagement with people using the service, those acting on their behalf and the community was positive and undertaken in a meaningful way. Relatives told us communication with staff and the management team was very good. Comments included, "Communication is excellent, they [staff and management team] phone and email me" and, "Staff do very well in communicating with the family, they always phone me at the slightest issue."
- Since the service opened in August 2022, the wellbeing lead and registered manager had established positive relationships with local community groups. This included the local fire station, police and local school. One relative told us, "The school children come in every week and read to the residents, that is [relative's] favourite."
- Some relatives confirmed they had had the opportunity to participate in a review of their family member's care needs. This helps to identify if the person's care package is working or their needs have changed. A relative told us their family member's needs had changed and this had been noticed by staff and as a result of this, a second care review had been planned.
- People and those acting on their behalf had been given the opportunity to attend family meetings. One relative told us, "There are family meetings, I get the minutes. I also attended a zoom meeting and looked at [relative] care plan."
- Staff meetings were held to give the management team and staff the opportunity to express their views and opinions on the day-to-day running of the service. Staff told us they had a 'voice' and felt empowered and able to discuss topics.
- In addition to the above, 'flash' meetings for staff were held on an 'ad-hoc' basis to inform staff what was happening at the service and to deliver key information.

Working in partnership with others

- Information demonstrated the service worked closely with others, for example, the Local Authority, healthcare professionals and services to support care provision.