

Mother Redcaps Care Home Limited

Sandy Banks Care Home

Inspection report

17 Greenside Gardens
Leyland
Lancashire
PR26 7SG

Tel: 01772494000

Date of inspection visit:
30 March 2021
31 March 2021

Date of publication:
30 April 2021

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

Sandy Banks is a care home providing personal and nursing care for up to 39 people. At the time of this inspection there were 31 people living in the home most of whom were living with dementia. The home had a variety of communal spaces available which included, lounges, dining rooms and quiet areas.

The service had a registered manager in post at the time of our inspection. 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.

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

People received safe care from staff who had received the necessary training and information about people's needs and preferences.

Relatives we spoke with were confident their relations were safe. Comments included, "[Name] is very safe there, they were brilliant with [name] and are very good and caring.", "They look after [name] really well, they are very safe there." and "The quality of care is excellent, [name] health and wellbeing has improved considerably."

Staff had been recruited safely and received induction training and other training relevant to their roles. Staff told us they felt confident they understood people's needs and how to care for them.

Risk assessment and management plans helped people to maintain their safety and wellbeing whilst promoting their independence and control.

People were protected, as far as possible, from the risks associated with the Covid 19 pandemic by robust policies and procedures.

The home was well managed and both staff and relatives said the home was friendly and caring. One relative said, "I think the openness in the home comes from the (registered) manager. If we ask a question we always feel they are telling us the truth."

People's relatives felt they had been communicated with on a regular basis during the recent pandemic lockdown. Comments included, "I get at least one phone call a week." and "They have a lady who rings me regularly. I know I could always speak to the manager if I had any problems at all."

Rating at the last inspection

The last rating for this service was good (published April 2018).

Why we inspected

This was a focused inspection prompted in part by some concerns which had been raised with CQC. The information suggested people may not be receiving consistent safe care in relation to personal care, skin care and health care. We looked at the key questions of safe and well-led. We did not find evidence to support the concerns and were assured people received safe care.

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?

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

Sandy Banks 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 completed by one inspector and two Experts 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

Sandy Banks Care 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.

Notice of inspection

We gave the service a short period of notice of the inspection to ensure it was safe for us to visit during the current Covid19 pandemic.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return. 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. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with the relatives of 20 people living in the home, nine members of staff and the area manager. We reviewed a range of records. This included three people's care records and medicine records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were also reviewed. We toured the whole building and reviewed maintenance records.

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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- We looked at the safeguarding log and found the provider had followed their robust safeguarding policies and procedures. This helped ensure people were protected from the risk of abuse and avoidable harm.
- Staff had received training in safeguarding and felt confident raising their concerns. Records we looked at showed staff had raised concerns in a timely way.
- The registered manager had raised safeguarding alerts with the local authority when required. Care plans had been updated in response to advice received.

Assessing risk, safety monitoring and management

- The provider had comprehensive risk assessment and management plans in place which helped people manage the risks in their lives.
- Care records we looked at included risk assessments and management plans. These included; mobility needs, medicines support, falls risks, nutrition and hydration and pressure care. We saw the management plans had been reviewed and updated regularly.
- Brief but detailed information was included on the handover records completed at each shift change. This helped ensure staff including agency staff, were clear about the most current support people needed to be safe.

Staffing and recruitment

- The provider had robust recruitment procedures in place which helped ensure people were recruited safely.
- We looked at the recruitment records for three staff. We found staff had been recruited in line with the providers' policies. Appropriate checks had been completed prior to staff starting work which helped ensure they were suitable to work with vulnerable people.
- Staffing levels were calculated based on people's needs. We reviewed several weeks staff rotas and found staffing had been maintained. There had been a high use of agency staff, however agency staff were consistent and supported by experienced staff.

Using medicines safely

- The provider had medicine management policies and procedures in place, which reflected good practice guidance.
- Medicines were managed safely. Medicine records we reviewed had been completed with no gaps. Controlled medicines were stored and administered correctly. People who had medicines on an 'when required basis' had protocols in place to guide staff when to give them and the correct dosage.

Preventing and controlling infection

- The providers infection control policies had been updated to reflect the additional risks posed by the Covid 19 pandemic. Staff understood and followed the procedures.
- We observed staff used personal protective equipment (PPE) at all times. We were assured staff adhered to good infection control practices.

Learning lessons when things go wrong

- Incidents and accidents had been recorded. Each incident form had a section which helped identify lessons which could be learned from what had happened.
- The provider had a system in place to review lessons learned and to amend practice when required. Some memo's and staff meeting minutes showed these were communicated to staff.

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 good. At this inspection this key question has remained the same. 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 provider and management team had clear policies and procedures in place which demonstrated their commitment to good quality care. Care records were person centred and focused on empowering people to be involved. Care records included details of people's equality and diversity needs and preferences.
- The staff were committed to achieving good outcomes for people. Staff told us, "I love working here, everyone is friendly and helpful." , "I really enjoy working at the home. It has a family feeling and the ethos of the home is so genuine."
- Relatives told us they were pleased with how well their relations had been looked after. Comments included; "They involved me with the care plans, we feel [name] is very safe and we are quite happy with everything." and "They've completely turned [name] around, They take care of them and have definitely improved their general health."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider and management team were clear with staff about their roles and responsibilities. Handover records we looked at detailed up to date information about people's needs and identified how they were to be met. Shift leaders which included nurses or seniors ensured staff were allocated to support people.
- The provider had effective quality monitoring in place and worked alongside the local authority commissioners quality assurance processes.
- Governance records we looked at showed care practice and records had been regularly checked and where any improvements had been identified these had been included in the home's improvement plan. Staff received feedback to support their understanding and development when needed.
- People living in the home and their relatives had been consulted about their views. There had been an increased use of social media and telephone calls due to the pandemic.
- Staff said the registered manager was approachable and they felt able to raise anything with them.
- Staff meetings had taken place. Meeting notes showed staff had been able to raise issues and share their views.

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 and management team understood their responsibilities to be open and honest with people. Relatives we spoke with told us the registered manager and staff often rang them to let them know of any

incidents or events which involved their relations. Comments included, "Everything that's been happening, they've phoned up and told me. They always involve me in decisions." and "They always go out of their way to make sure I know how [name] is, they call regularly to update me. They involved me in discussions with other [other professionals]."

- The registered manager had notified CQC of all notifiable incidents. The homes inspection rating was displayed in the foyer.

Working in partnership with others, Continuous learning and improving care

- The provider and registered manager continued to work in partnership with other organisations and agencies. These included; local authority commissioners, community-based health professionals and other homes within the provider group.

- Opportunities for continuous learning had been affected by the pandemic, however some training had been planned for nursing staff in relation to complex medicine management skills.