

Aspects Care Homes Ltd Montague Court

Inspection report

89 Woodway Lane Coventry CV2 2EG

Tel: 07976394913

Date of inspection visit: 09 March 2022

Good

Date of publication: 13 April 2022

Ratings

Overall rating for this service

Is the service safe?GoodIs the service effective?GoodIs the service caring?GoodIs the service responsive?GoodIs the service well-led?Good

Summary of findings

Overall summary

About the service

Montague Court is a mental health supported living complex providing personal care to up to 20 people living in their own individual flats based across two buildings. The service provides support to men aged between 18 and 65. At the time of our inspection there were 19 people using the service. Of these three were receiving support with personal care. Montague Court is made up of two buildings on the same site. Each building has 10 individual flats and people are tenants of a housing association. There are no communal areas for people. Staff have an office and staff room in one building.

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

Staff understood the needs of people well and how to keep them safe. Risks relating to individuals had been assessed and well managed. Medicines were administered safely with people supported to do this independently where appropriate. Staffing levels were good, and the service did not use agency staff. Staff wore appropriate Personal Protective Equipment (PPE) in line with government guidance.

The registered manager ensured staff were suitably recruited, trained and supported so they could do their roles well. People were supported to be fully independent where appropriate and to have maximum choice and control of their lives. Policies and systems were in place to ensure people received support in the least restrictive way possible.

Staff provided care which was person-centred and encouraged people to live independently in their own flats.

Staff ensured the support provided was responsive to people's individual needs. Care plans were developed in partnership with people to ensure they followed people's preferences, religious and cultural beliefs and values. Staff respected people's preferred ways of communicating and referred to people by their chosen names.

The registered manager had systems and processes to learn from incidents and events which affected the service. They had contingency plans which covered emergencies such as staff sickness. Staff felt well supported and spoke highly of the registered manager. There were processes to monitor the quality of care provided.

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

Rating at last inspection and update

The last rating for this service at the previous premises was good (published 06 December 2016). It was reregistered at its current premises on 21 January 2021.

Why we inspected

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

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 effective?	Good 🔍
The service was effective.	
Details are in our effective findings below.	
Is the service caring?	Good 🔍
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Good 🔍
The service was responsive.	
Details are in our responsive findings below.	
Is the service well-led?	Good 🔍
The service was well-led. Details are in our well-led findings below.	



Montague Court 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.

Inspection team

One inspector carried out this inspection onsite and an Expert by Experience made telephone calls. 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

This service provides care and support to people living in a 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 09 March 2022 and ended on 10 March 2022. We visited the location's office/service on 09 March 2022.

What we did before inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals who work with the service. 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. We used all this information to plan our inspection.

During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with three members of staff including the registered manager and care workers. We reviewed a range of records. This included three people's care records and medication records. We looked at three staff files in relation to recruitment and staff support. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data, quality assurance records and policies and procedures.

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 said they felt safe living at Montague Court. One said "Definitely I do [feel safe]. They [the staff] are always helpful and ready to listen. Staff say, look, if there is a problem come and tell us and they mean it."
- Staff understood the whistle blowing process and information about speaking up was displayed in the home for both staff and residents. Whistle blowing is where people can disclose concerns about any part of the service where they feel dangerous, illegal or improper activity is happening.
- The provider had effective safeguarding systems in place. The registered manager ensured staff received training and understood what to do to keep people safe from harm.

Assessing risk, safety monitoring and management. Learning lessons when things go wrong • People's safety and ongoing risk was managed well. Staff continually assessed and identified risks, and these were recorded on a range of risk assessments which were up to date and shared with people.

- The registered manager ensured people's care plans and risk assessments were audited regularly and updated as needs changed.
- The registered manager shared information and lessons learnt with staff in meetings and supervision.

Staffing and recruitment

- People said staff were 'approachable' and that there were enough staff who know them well to provide them with support.
- There were enough staff to meet people's needs. Staff said they were happy to cover gaps in the rota as overtime, so the registered manager did not use agency staff.
- The registered manager ensured staff were recruited safely in line with the provider's policies and procedures.

Using medicines safely

- People's prescribed medicines were securely stored, medicine administration records were fully completed and up to date.
- The registered manager ensured staff received training in the safe administration of medicines and completed regular competency checks. Medicines errors were recorded, and the records were audited so learning and actions could be shared with staff.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.

- We were assured that the provider was admitting people safely to the service.
- 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.
- We were assured that the provider's infection prevention and control policy was up to date.

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 before they moved to the home to ensure these could be met.
- People were involved in writing their care plans which were relevant and personalised. They included information about communication needs, health and well-being, religious and cultural needs and reflected how the person wanted to be supported.
- Staff received training relating to equality and diversity and this was reflected in the care plans and how support was provided to each individual.

Staff support: induction, training, skills and experience

- Staff training was up to date. Staff said training was adequate for their role and they could ask for additional specialist training at any time.
- Managers carried out spot checks of staff practice to ensure staff were competent and had the skills necessary to support people.
- The registered manager ensured new staff received an induction, training and worked with experienced staff to allow them time to get to know people.

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

- People had access to a range of healthcare professionals. These included mental health professionals, social workers and a local GP.
- Staff completed weekly wellbeing checks with each individual. These focussed on both physical health and mental wellbeing. Staff shared information during handover at the start of each shift.
- The registered manager ensured all information from professionals was updated in the care files and made available for staff.

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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- People were included in all decisions about their care and this was evidenced in the records. People's individual choices and preferences were written down for staff to follow.
- Staff received training in the Mental Capacity Act (2005). They understood the guiding principles and how they should be applied. Capacity assessments were individualised and decision specific. Where applicable staff ensured decisions were made in people's best interests taking into account their wishes.
- The registered manager understood the requirements of the Deprivation of Liberty Safeguards and how to apply for these. There were no DoLS applications in place at the time of the inspection.

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 said staff were caring and knew them well. One person said "They're [the staff] all very nice. They take their time to listen and are incredibly kind."
- Staff understood their roles through training and support from managers. Staff worked alongside people in partnership and empowered people to build the skills, confidence and self-belief to move towards independent living.
- The registered manager knew people well and was available onsite to help provide support and encouragement.

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

- People were encouraged to give feedback during their wellbeing chats or directly to the management team.
- Staff talked to people about accessing independent advocacy and supported them to access it if they needed to. One person said "They [the staff] don't interfere in my life. They all know what I'm up to, but it's done respectfully. They speak to me like an equal."
- •Leaflets and posters were displayed throughout both buildings so that people had the information they needed to make decisions about the type of support they wanted.
- The registered manager was available to speak to residents and listen to their ideas and concerns.

Respecting and promoting people's privacy, dignity and independence

- People said Montague Court was a good place to live. We observed other people engaging with staff and it was clear they had relationships built on trust and understanding.
- Staff understood people's communication needs and knew people and their previous life histories well.
- The registered manager and their team promoted a strong culture based on respecting people this was evidenced in the way care plans were written and observations of the way support was being delivered to people during the inspection.

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 were involved in writing and reviewing their care plans. Care plans were personalised and up to date. One person said "Because I want to be independent and do my own thing it's important it works for me. I've always felt I can say what I want in it."
- Staff updated care plans as people's needs and choices changed.
- The registered manager audited care plans and the daily records and gave feedback to staff about the quality of these, so they were continually being improved and easy to use.

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.

- Staff understood how people liked to communicate. This was set out in care plans and staff used these to meet the individual needs of people in their care. For example we saw staff supporting someone to access a video call with a professional so they could fully contribute in the meeting.
- The registered manager ensured information was available in a range of formats such as easy read to meet the needs of people living at Montague Court.

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 followed a programme of activities independently and chose what they wanted to do each day.
- Staff were available to offer guidance and support when needed but did not initiate the activities themselves. One person told us 'There are two [staff] who I do circuit training with and boxing. I'd have to

know them well to do that."

Improving care quality in response to complaints or concerns

- People knew how to make complaints. Information was available in formats they could understand and was displayed within the home.
- Staff understood their responsibility to support people to raise concerns or complaints.
- The registered manager responded to concerns and complaints in a timely manner and spoke to people involved. Learning was shared with the staff team to help the service to continue to improve.

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

- People were positive about the registered manager and the culture of the home which they described as 'incredibly supportive'.
- Staff told us the service was well-managed. They used words such as supportive and approachable to describe managers and were enthusiastic about their jobs.
- The registered manager had regular meetings with staff to discuss the delivery of the service. Meeting notes showed that areas such as training, staffing and risk were discussed.

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

- Staff said that they discussed things with people when they went wrong and offered support so that they understood how this might affect them.
- The registered manager understood their responsibility to inform CQC about events which affected their service such as safeguarding, or absence of the manager for more than 28 days.

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

- The service had a registered manager who was supported by a deputy who covered in their absence.
- Staff enjoyed working for the service and felt well supported and included through their monthly individual meetings and regular team meetings.
- The provider supported the manager and ensured they had people they could contact for support and advice. They worked together to ensure quality improvement of the service through regular audits, learning from these and discussing outcomes in meetings.
- The registered manager had oversight of the service and used audits of care records and observations of staff practice to ensure care was being provided as it should be.
- The provider completed an annual quality assurance survey with both people and staff and used information from this to improve the service.

Working in partnership with others

• People were supported to speak with professionals and people who were important to them when they needed to.

• The registered manager and staff ensured each person had the right professionals involved in their care and support, so they felt safe and happy this included mental health professionals, consultants, social workers and nurses.

• The registered manager had a good relationship with commissioners and professionals who referred people to the service.