Maison Moti Limited

Maison Moti Care Home

Inspection report

200 Chase Side, Southgate, London, N14 4PH
Tel: 020 8440 7535

Date of inspection visit: 5 May 2015
Date of publication: 29/06/2015

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

Overall summary

This inspection took place on 5 May 2015 and was unannounced. The provider met all the standards we inspected against at our last inspection on 2 July 2014.

Maison Moti Care Home provides care and support to a maximum of 15 adults with mental health needs. At the time of our inspection, there were twelve people using the service.

There was 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 who used the service told us they felt safe in the home and around staff. There were systems and processes in place to help protect people from the risk of harm. These included thorough staff recruitment, staff training and systems for protecting people against risks of abuse.

There were enough suitably trained staff to meet people's individual care needs. We saw staff spent time with people and provided assistance to people who needed it.

Medicines were managed and administered safely and staff received appropriate medicines administration training.

People received personalised care that was responsive to their needs. Care plans were person-centred, detailed

Summary of findings

and specific to each person and their needs. People were consulted and their care preferences were also reflected. People's health and social care needs had been appropriately assessed. Identified risks associated with people's care had been assessed and plans were in place to minimise the potential risks to people.

Staff had the knowledge and skills they needed to perform their roles. Staff spoke positively about their experiences working at the home.

The majority of staff had received training in the Mental Capacity Act 2005 and were able to demonstrate a good understanding of how to obtain consent from people. Staff understood they needed to respect people's choice and decisions if they had the capacity to do so.

The CQC is required by law to monitor the operation of the Deprivation of Liberty Safeguards (DoLS) which applies to care homes. DoLS ensure that an individual being deprived of their liberty is monitored and the reasons why they are being restricted is regularly reviewed to make sure it is still in the person's best interests. No DoLS applications had been submitted as people were not restricted.

Positive caring relationships had developed between people who used the service and staff and people were treated with kindness and compassion. People were being treated with respect and dignity and staff provided prompt assistance but also encouraged people to build and retain their independent living skills.

The service had an open and transparent culture where people were encouraged to have their say and staff were supported to improve their practice. We found the home had a clear management structure in place with a team of care staff and the registered manager. There was a system in place to monitor and improve the quality of the service which included feedback from people who used the service, staff meetings and a programme of audits and checks.

Summary of findings

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. People who used the service told us they felt safe in the home.

Staff were aware of different types of abuse and what steps they would take to protect people. Risks to people were identified and managed so that people were safe and their freedom supported and protected.

We saw that appropriate arrangements were in place in relation to the recording and administration of medicines.

The provider had appropriate systems in place to manage emergencies.

Is the service effective?

Good

The service was effective. Staff had completed relevant training to enable them to care for people effectively. Staff were supervised and felt well supported by their peers and the registered manager.

People were provided with choices of food and drink. People's nutrition was monitored.

People were able to make their own choices and decisions. Staff and the registered manager were aware of the requirements of the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards (DoLS) and its importance.

People had access to health and social care professionals to make sure they received appropriate care and treatment.

Is the service caring?

Good

The service was caring. We saw that people were treated with kindness and compassion when we observed staff interacting with people using the service. The atmosphere in the home was calm and relaxed.

Wherever possible, people were involved in making decisions about their care and staff took account of their individual needs and preferences.

People were treated with respect and dignity. We saw that staff respected people's privacy and dignity and were able to give examples of how they achieved this.

Is the service responsive?

Good

The service was responsive. Care plans were person-centred, detailed and specific to each person and their needs. People were consulted and their care preferences were reflected in the care plans.

People were encouraged to provide feedback about the quality of the

service they received. We saw evidence that care reviews were being held between people and staff.

The home had a complaints policy in place and there were procedures for receiving, handling and responding to comments and complaints.

Summary of findings

Is the service well-led?

Good

The service was well led. Staff were supported by the registered manager and felt able to have open and transparent discussions with him through supervision meetings and staff meetings.

The home had a clear management structure in place with a team of care staff and the registered manager.

Systems were in place to monitor and improve the quality of the service.

Maison Moti Care Home

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, and to provide a rating for the service under the Care Act 2014.

We undertook an unannounced inspection on 5 May 2015 of Maison Moti Care Home. The inspection was carried out by one inspector.

Before we visited the home we checked the information that we held about the service and the service provider including notifications about significant incidents affecting the safety and well-being of people who used the service.

During this inspection we observed how staff interacted with and supported people who used the service. We reviewed four care plans, four staff files, training records and records relating to the management of the service such as audits, policies and procedures. We spoke with six people who used the service and one relative. We also spoke with the registered manager, three members of staff and two care professionals.

Good

Is the service safe?

Our findings

All people we spoke with at Maison Moti Care Home told us that they felt safe in the home. One person said, "Yes I am very much safe here." Another person told us, "I feel safe, yes." Care professionals we spoke with told us that they felt people were safe in the home and did not have concerns about this.

Staff said they would recognise changes in people's emotional behaviour if things were not right. Staff understood the different kinds of abuse and knew how and where to make a referral. Staff knew what action they would take if they suspected abuse had happened within the home. They said that they would directly report their concerns to the manager. Staff were aware that they could report their concerns to the local safeguarding authority and the CQC. We saw evidence that the majority of staff had received training in how to safeguard adults and training records confirmed this. Those who were due safeguarding training had a date scheduled. Safeguarding policies and procedures were in place to help protect people and minimise the risks of abuse to people. However, we noted that the home's safeguarding policy did not make reference to the CQC and the requirement to inform the CQC of safeguarding incidents. Further, the policy did not provide details of the local authority safeguarding team. We spoke with the registered manager about this and following the inspection, we were provided with a copy of the updated policy which included this information. We did however note during our inspection that the CQC and local authority safeguarding team's contact details were clearly displayed in the office.

The service had a whistleblowing policy and contact numbers to report issues were available. Staff were familiar with the whistleblowing procedure and were confident about raising concerns about any poor practices witnessed.

Records and staff's knowledge demonstrated the service had identified individual risks to people and put actions in place to reduce the risks. They included preventative actions that needed to be taken to minimise risks and measures for staff on how to support people safely. Risk assessments were in place for various areas such as personal hygiene, vulnerability in the community and absconding. The assessments outlined what people could do on their own and when they needed assistance. This helped ensure people were supported to take responsible risks as part of their daily lifestyle with the minimum necessary restrictions.

On the day of the inspection we observed that staff did not appear to be rushed and were able to complete their tasks. Through our discussions with staff, we found there were enough staff to meet the needs of the people living in the home. One member of staff told us, "There are enough staff. We manage well." Another member of staff said, "Staffing numbers are fine." People who used the service expressed no concerns regarding staffing levels. The registered manager told us there was flexibility in staffing levels so that they could deploy staff where they were needed. For example, if people needed to be supported on day trips or when people had to attend appointments. The registered manager told us staffing levels were assessed depending on people's needs and occupancy levels. We looked at the staff duty rota and saw that this correctly reflected the staff on duty on the day of our inspection.

We looked at the home's recruitment process to see if the required checks had been carried out before staff started working at home. We found that there were effective recruitment and selection procedures in place to ensure people were safe. We looked at the recruitment records for four staff and found appropriate background checks for safer recruitment including enhanced criminal record checks had been undertaken. Two written references and proof of their identity and right to work in the United Kingdom had also been obtained.

The home had plans in place for a foreseeable emergency. This provided staff with details of the action to take if the delivery of care was affected or people were put at risk. For example, in the event of a fire or damage to the building.

The premises were well-maintained and clean. Risks associated with the premises were assessed and all relevant equipment and checks on gas and electrical installations were documented and up-to-date.

Systems were in place to make sure people received their medicines safely. People told us that they received their medicines on time. Medicines were stored at the correct temperatures and were disposed of safely and appropriately at the end of each medicines cycle. Medicine administration records (MAR) sheets confirmed each medicine had been administered and signed for at the

Good

Is the service safe?

appropriate time. We checked a sample of medicines and found quantities of boxed medicines matched the stocks of available medicines. Staff who administered medicines told us they had completed training and understood the procedures for safe storage, administration and handling of medicines.

Good

Is the service effective?

Our findings

People told us that the care they received was good and they received care and support when needed. One person told us, "They look after me nicely. The manager and staff are all nice." Another person said, "Staff are so helpful. They pay attention to every detail and aim to please."

Two care professionals told us they did not have any concerns about staff skills and knowledge at the service.

We spoke with the registered manager about the training arrangements for staff. Training records showed that staff had completed training in areas that helped them when supporting people living at the service. Topics included emergency first aid, safeguarding, the Mental Capacity Act 2005, infection control, medicine handling and food safety. The registered manager kept a training matrix to record what training staff had received and what was due. We saw that some staff required training in some areas and spoke with the registered manager about this. She explained that where training was required, this had been booked or was due to be booked. Staff spoke positively about the training they had received. One member of staff said, "There are lots of training opportunities." and, "The manager always listens to feedback about training we have received."

All staff we spoke with told us that they felt supported by their colleagues and management. One member of staff told us, "I enjoy working here and the manager is supportive." Another said, "Management are brilliant. I have had a positive experience working here." We spoke with staff and looked at staff files to assess how staff were supported to fulfil their roles and responsibilities. We saw evidence that staff received supervisions and this was confirmed by staff we spoke with. However, we noted that some supervision sessions were not consistently documented and raised this with the registered manager. The registered manager showed us evidence that she recorded the sessions in her diary but had not yet transferred this information into the necessary forms. She confirmed that she would ensure that this information was transferred and consistently recorded. We saw evidence that staff received annual appraisals about their individual performance and had an opportunity to review their personal development and progress.

Staff told us they felt confident and suitably trained to support people effectively. Staff said they had completed an induction when they started at the home and said that the induction had been beneficial. One member of staff said, "The induction was fine. I was provided with a lot of information and staff were very patient."

We saw care plans contained information about people's mental state and cognition. People who used the service were able to make their own choices and decisions about care and they were encouraged to do this through regular key worker sessions with staff. One person told us, "Staff listen to me and involve me in decisions." Another person said, "They encourage me to make decisions." When speaking with the registered manager, she demonstrated a good understanding of the Mental Capacity Act 2005 (MCA) and issues relating to consent. Training records showed that all staff received training in this area as part of their induction and also the majority of staff had received further MCA training. Staff we spoke with had knowledge of the MCA and were aware that they should inform the registered manager of any concerns regarding people's capacity to make their own decisions. They were also aware of the importance of ensuring people were involved in decision making and where people were unable to make decisions of the importance of involving their relatives.

The CQC monitors the operation of the Deprivation of Liberty Safeguards (DoLS) which applies to care homes. The registered manager understood the requirements of the Deprivation of Liberty Safeguards (DoLS). There were systems in place to follow the requirements when DoLS were required.

The arrangements for the provision of meals were satisfactory. We saw that there was a set weekly menu and people chose what they wanted to eat and this was accommodated for. There were alternatives for people to choose from if they did not want to eat what was on the menu.

The registered manager explained that people decided what they would like to have on the menu during the resident's meeting. People we spoke with were generally positive about the food at the home. One person told us, "We get a variety of good food. They cook what I like. I am able to cook here and I like it." Another person said, "The food is nice. There are different foods every day." One person we spoke with told us, "The food is okay. There could be more choice." During the inspection we observed people having their lunch, which was unhurried. The atmosphere during lunch was relaxed and people

Good

Is the service effective?

appeared to be enjoying their meal. We also observed staff preparing dinner on the day of the inspection. We saw that the food was freshly prepared and looked appetising. The kitchen was clean and we noted that there were sufficient quantities of food available. Further, we checked a sample of food stored in the kitchen and saw they were all within their expiry date. Food that had been opened was appropriately labelled with the date they were opened so that staff were able to ensure food was suitable for consumption.

People's weights were recorded monthly so that the service could monitor people's nutrition. We saw that one person had a low appetite and was at risk of weight loss. As a result, staff completed a detailed record of their food intake so that they could monitor this person's nutrition and ensure that they were eating sufficient quantities of food.

People were supported to maintain good health and have access to healthcare services and received ongoing healthcare support. Care plans detailed records of appointments with care professionals.

Good

Is the service caring?

Our findings

When asked about the home and how they felt about living there, one person told us, “The home is really lovely.” Another person said, “This is the best home here. It is very nice.” One person also said, “It is very nice here. I am happy here.” All people spoke positively about the care and support they received at the home and no concerns were raised. One relative we spoke with told us, “The home is very, very good. Staff are excellent.”

Consistency of staff meant people were familiar with staff and appeared comfortable around them. People spoke positively about care staff. One person said, “Staff are all polite and pleasant. I like them” and another said, “The manager and staff are all nice.” Consistency of staff also meant that staff were aware of people’s individual needs and what support they required. One member of staff told us, “I am very comfortable around people in the home.”

We observed interaction between staff and people living in the home during our visit and saw that people were relaxed with staff and confident to approach them throughout the day. Staff interacted positively with people, showing them kindness, patience and respect. People had free movement around the home and could choose where to sit and spend their recreational time. We saw people were able to spend time the way they wanted. Some people chose to listen to music on their own in the communal lounge and some people watched television. Other people went out during the day. Staff spent time with people, discussing topics such as what people wanted to do and what they wanted to eat.

On the day of our inspection, we observed one person appeared distressed about an upcoming day trip and went to speak with the registered manager about this. We noted that this person felt comfortable raising their concerns with the registered manager and the registered manager took time to sit down with this person to talk about their concerns and reassure them.

Staff had a good understanding of treating people with respect and dignity. They also understood what privacy and dignity meant in relation to supporting people with personal care. They gave us examples of how they maintained people’s dignity and respected their wishes. One member of staff said, “I always knock on people’s doors before entering their room and ask permission before doing anything. It is important to give people space and time.”

We saw people being treated with respect and dignity. We observed care staff provided prompt assistance but also encouraged people to build and retain their independent living skills and daily skills. Care plans set out how people should be supported to promote their independence and

we observed staff following these during the inspection. People were supported to express their views and be actively involved in making decisions about their care, treatment and support. Care plans were individualised and reflected people’s wishes.

Care staff were patient when supporting people and communicated well with people. They were knowledgeable about people’s likes, dislikes and the type of activities they enjoyed. The registered manager and care staff we spoke with explained to us that they encouraged people to be independent and to do things themselves.

Good

Is the service responsive?

Our findings

People told us that they received care, support and treatment when they required it. They said staff listened to them and responded to their needs. One person said, "Staff ask me what I like and give me a choice. Staff listen to me and they help when I need it." Another person told us, "Staff are very helpful."

We looked at four care plans and found they contained detailed information that enabled staff to meet people's needs. Care plans contained personal profiles, personal preferences and routines and focused on individual needs. There were appropriate risk assessments and detailed guidance for staff so people could be supported appropriately. We saw that care plans identified potential relapse triggers when certain behaviours were presented and what support could be offered to keep people safe. There was evidence that people were involved in completing their care support plan and these were person centred. We saw that care plan's had been signed by people to show that they had agreed to the care they received.

Staff responded promptly when people's needs had changed. Staff told us that they were made aware of changes at handover meetings so they were given the information they needed to know to provide appropriate support. When changes occurred, care plans were reviewed and changed accordingly.

People who used the service were able to lead social lives that were tailored to their needs. During our inspection, we observed that some people were out throughout the day and others were in the home. We looked at the activities timetable which included a variety of activities such as bingo, eating out, cooking, a trip to Ikea and baking. The registered manager explained that the provider put together an activities timetable and people were asked in advance what they would like to participate in. People we spoke with told us that there were sufficient activities available and had no complaints. One person said, "There are enough activities such as arts and crafts." And another told us, "Staff do activities. We listen to music. I go to a computer class." One person said, "There are activities like quizzes and book club. There is enough. It is fine." We saw evidence that the service kept a record of the activities people got involved with. However we noted that the records were not up to date and raised this with the registered manager. She confirmed that this information would be consistently recorded.

There were systems in place to ensure the service sought people's views about the care provided at the home. There was evidence of regular key worker sessions where people were given an opportunity to discuss their individual progress as well as other issues important to them such as food served and day trips planned. A satisfaction questionnaire had been completed by people who used the service in February 2015. This showed that people were generally satisfied with the service. The provider had acknowledged the areas for improvement and an action plan had been prepared in response to this.

Information on how to make a complaint was available to people who used the service. No complaints had been received by the service since our last inspection. People told us they felt free to raise issues with the staff or registered manager and were confident they would be addressed. One person said, "I feel able to talk to the manager and staff if I need to." and "No complaints about it here." The home had a complaints policy in place and there were procedures for receiving, handling and responding to comments and complaints. We saw the policy also made reference to contacting the CQC and local authority if people felt their complaints had not been handled appropriately by the home. However, we noted that the policy did not make reference to the local government ombudsman as another agency which deals with complaints. The registered manager said that the policy would be updated to include this.

Good

Is the service well-led?

Our findings

People told us that they found the registered manager approachable and understanding when issues had been raised. One person said, “The manager is good. I feel comfortable raising issues if I need to.” and another told us, “If I had a complaint I feel able to raise it.” One relative we spoke with told us, “The manager is excellent.”

Staff spoke positively about working at the home. They told us the registered manager was approachable and the service had an open and transparent culture. One staff member said, “The registered manager is great. I wouldn’t swap her for any other manager.” Staff also told us that the morale within the home was good and that staff worked well with one another. One member of staff said, “The team work really well together.”

The home had a service users’ guide which was available at the front of the home. The guide explained some of the service’s values which included high standards of care, transparency, independence, passion and equality which staff implemented when providing care within the home.

Staff told us they were informed of any changes occurring within the home through regular staff meetings, which meant they received up to date information and were kept well informed of developments. On the day of our inspection, we noted that a staff meeting took place and observed that during the meeting staff were encouraged to discuss people’s changing needs, changes within the home as well as learning opportunities. Staff told us that they did not wait for the team meeting to raise queries and concerns. Instead, they said they discussed such issues during daily handovers and felt able to speak with the registered manager at any time.

People who used the service and staff confirmed that the home held formal resident’s meetings to discuss the meal menu, upcoming activities and any concerns or queries people had. The registered manager also told us that she encouraged people and relatives to communicate with her at any time about any concerns they may have. People who used the service told us that if they had any issues they felt comfortable raising them with the registered manager.

The service undertook a range of checks and audits of the quality of the service and

took action to improve the service as a result. We saw evidence that the service carried out quarterly care file audits, maintenance and health and safety checks and weekly and monthly medicines audits. Accidents and incidents were recorded and analysed to prevent them reoccurring.

The registered manager told us they supported staff by investing in training that enabled staff to support the people they looked after. Staff spoken with said there were regular meetings where they were able to discuss their personal development objectives and goals. Staff said they found meetings useful because it helped them to discuss people’s needs, but also any learning opportunities or training needs for them.

People’s care records and staff personal records were stored securely which meant people could be assured that their personal information remained confidential.