

Minerva Supported Living Ltd

31 Westleigh Road

Inspection report

31 Westleigh Road
Leicester
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Ratings

Overall rating for this service

Good 

Is the service safe?

Requires Improvement 

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

31 Westleigh Road is a supported living service that provides personal care and support to younger adults with mental health conditions living in shared communal accommodation. At the time of this inspection the service was providing personal care to 1 person.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

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

Improvements were needed in the recruitment of staff to ensure practices were consistent with the provider's recruitment policy. People were encouraged to be involved in staff recruitment; however their involvement was not always recorded.

Fire drills had not taken place. People did have a personal emergency evacuation plan.

People received the support they required with their medicines. However records for monitoring the quantity of medicines on site, and guidance to support staff for supporting people with medicines to be taken as and when needed required improvement.

Systems and processes were in place to support people's safety. People were involved in assessments of their needs which included potential risk. People spoke with us about potential risks, and of staff's role in supporting them. People's comments were consistent with the information detailed within their care records. There were sufficient staff to meet people's needs. Staff worked consistently within the provider's policy and procedure for infection prevention and control.

Assessments of need were undertaken to determine if the service was appropriate for each person. People were encouraged to visit the service and meet with those already in residence to enable them to make an informed decision as to whether the service would be suitable to them.

People were supported by staff who had the necessary skills. People were supported by and had access to a range of health and social care professionals. People were encouraged and supported to undertake grocery shopping and prepare and cook their meals within the shared kitchen, and in some instances within their own kitchenette.

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. Staff had a good understanding of the importance of enabling and encouraging people to make informed decisions about their care.

People were supported by staff who were kind and caring and who had a good understanding of the needs of people, and their role in providing support. A person spoke positively about their relationships with staff and how they supported them with their wellbeing.

People were involved in the development and reviewing of their support plans. People were encouraged and supported to maintain relationships and to access resources in their local community. People's concerns were listened to and action taken in response.

People and staff spoke positively of the registered manager, including the support they provided. Systems to monitor the quality and safety of the service were in place, which included meetings with all those involved in the delivery and monitoring of care. People's views and those of staff were sought through questionnaires. The registered manager was receptive to ideas and ensuring the continuous improvement of the service.

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 4 January 2022 and this is the first inspection.

Why we inspected

This was a planned inspection.

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 not always safe.

Details are in our safe findings below.

Requires Improvement 

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 

31 Westleigh Road

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

The inspection was carried out by 1 inspector.

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.

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

We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

Inspection activity started on 7 December 2022 and ended on 13 December 2022. We visited the location on 7 December 2022.

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 professionals who work with the service.

During the inspection

We spoke 1 person about their experience of the care provided. We spoke with the registered manager, a senior support worker and 3 support workers.

We reviewed a range of records. This included 1 person's care records. We looked at 2 staff files in relation to recruitment. A variety of records relating to the management of the service were reviewed, including quality monitoring, minutes of meetings, and the staff training and supervision matrix.



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 Requires Improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Staffing and recruitment

- Improvements were needed to staff recruitment practices. The provider's policy for the recruitment of staff had not always been followed, which meant the provider could not be assured staff were safe to work with people. For example, a staff member's records did not include an application form and there was no record of their interview, or evidence to support potential gaps in employment had been explored. The person had a character reference. The registered manager advised the person had completed an application form; however, this could not be located.
- Opportunities were available for those using the service to take part and be involved in the recruitment of potential staff. A person told us they had asked questions and had the opportunity to meet people and share their views about prospective candidates. However, the recording of people's involvement in staff interviews could be improved to evidence how they influenced recruitment decisions.
- Disclosure and Barring Service check (DBS) had been carried out. The DBS assists employers to make safe recruitment decisions by ensuring the suitability of individuals to care for people.
- Staff undertook a period of induction, where they worked alongside experienced staff. Ongoing support was provided through a systematic approach to supervision and observed practice. This ensured staff had the appropriate support, knowledge and competence to promote people's safety and well-being.

Assessing risk, safety monitoring and management

- In the event of a fire a person told us where the meeting point was and that they had a personal emergency evacuation plan (PEEP). However, staff told us fire evacuation drills had not taken place. The registered manager told us action would be taken and fire drills would be held.
- Potential risks were assessed and kept under review to promote the person's independence and safety.
- A person spoke to us about the 'triggers', which may affect their wellbeing. They told us how staff supported them to promote their mental health.
- Records detailing potential risks and how these were to be mitigated were consistent with the information provided by the person we spoke with. This showed people were involved in decisions relating to their care and support.
- An external professional confirmed risks to the person were managed well by the provider and in a collaborative way. They said any increase in risk was communicated and discussed.

Using medicines safely

- Systems were in place to support the person with their medicines. However, improvements were required to records to make it clear the quantity of medicines on site. The registered manager said they would take

action to bring about improvements.

- Where medicine was prescribed for as and when required, for example for support with anxiety and pain management, the registered manager advised these were requested by the person. However, there were no protocols providing guidance for staff. The registered manager said they would put into place guidance for staff.
- Assessments and assessment of risk had been undertaken to identify the level of support, if any, was required by people with their medication.
- A person told us staff ordered and stored their medicines. In some instances they said staff reminded them to take their medicine and told us they administered the medicine themselves from a monitored dosage system and signed to say they had taken their medication. They told us the name of the supplying pharmacist, but that they had no wish to manage their own medication presently.
- Staff who administered medication undertook medicines training and their competency was assessed. Staff told us, as part of their development, there was a 'medication of the week', which provided staff with information about the medicines people were prescribed, and why.

Systems and processes to safeguard people from the risk of abuse

- Systems, processes and practices safeguarded people from abuse.
- A person we spoke with told us they were confident to raise concerns with staff, and also with the nominated individual who visited the service. They told us they had a phone and could raise concerns independently with a friend or with social services.
- Staff had been trained in safeguarding procedures and knew what action to take to protect people from harm and abuse.
- Staff were aware of who the safeguarding lead was within the organisation and knew how to raise concerns with them and with the registered manager. Staff were aware of external organisations they could contact.

Preventing and controlling infection

- Systems and processes were in place to protect people from the risk of cross infection.
- Staff had received training in infection prevention measures. Staff told us how they used hand sanitising gel, and personal protective equipment to support people with personal care and medicine administration.
- The person and staff were responsible for cleaning. A person spoke of the support and encouragement staff provided in keeping their rooms clean and tidy, and the potential risks to their health and wellbeing if their rooms were untidy, which included support with their laundry.

Learning lessons when things go wrong

- The registered manager kept a record of all incidents, which included safeguarding concerns, medicine recording errors and safety concerns. These were kept under review and were discussed in staff meetings to support in the prevention of similar events happening again.

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

- The person's needs had been assessed prior to them moving into the service, which included consideration of protected characteristics as defined by the Equality Act 2010.
- The registered manager told us people had a tailored package of support before they made a decision to move into the service, which included visits to the service as part of their assessment to enable them to make an informed decision as to whether the service was the right one for them.
- People who were potentially moving into the service met with those already living at the property and their views sought as part of the registered manager's consideration as to the compatibility of people living together. A person told us they had met people before they moved in and had had a chance to get to know them.

Staff support: induction, training, skills and experience

- Staff had the necessary skills, knowledge and experience to provide people with the support they required. Systems were in place to support staff, which included a period of induction, ongoing training and support through supervision.
- A person spoke positively of staff's knowledge in meeting their needs, and they expressed confidence in staff's ability to provide the support they needed.
- Staff spoken with had a good understanding of the person's needs. Staff were able to talk about potential indicators for a decline in the person's mental health, and the action they would take to support and encourage their wellbeing.

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

- A person told us they regularly undertook grocery shopping, and that staff assisted them to carry their shopping. They spoke of the meals they prepared and cooked with staff support, and of how they independently prepared lighter snacks and drinks in their own rooms.

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

- The person's records provided information as to health and social care professionals involved in their care.
- The person spoke candidly about their physical and mental health and told us they had regular support from a health care professional and that they knew how to contact them.
- The person's records provided information about the involvement of health care professionals, which included hospital appointments for routine screening.

- An external professional confirmed staff were responsive to any concerns and liaised with themselves and the person's GP appropriately and in a timely manner.

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 supported to make daily decisions and choices about their care. A person told us of the decisions they made on a day to day basis with regards to all aspects of their care and support, both within the service and decisions related to activities and events within the wider community.
- Staff had a good understanding of the MCA and its 5 underpinning principles. A staff member spoke of the importance of not assuming people did not have capacity. They told us of the importance of respecting people's decisions, and that any decisions made on behalf of people, should be in their best interests, and the least restrictive.

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

- Staff were kind and compassionate in their day to day care and support of people.
- A person told us staff were kind and caring, and said they felt valued and listened to. A person spoke about staff having knowledge of their personal history and told us some staff had known them prior to moving to the service.
- The person went on to speak about how staff understood the support they needed and knew what was important to them.
- Staff spoke in depth of their role in promoting equality, diversity and inclusion. They spoke of providing opportunities and encouraging people to make decisions in their day to day lives, without any preconceived barriers based on people's health needs.

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

- The person talked about the support and care they received on a day to day basis with all aspects of their life, which was consistent with the information detailed within their care records. All care records had been signed by them and a member of staff and were regularly updated and reviewed.
- A professional confirmed the person had developed a good rapport with staff who supported them to make informed decisions about their life and care.

Respecting and promoting people's privacy, dignity and independence

- Staff spoke of their role as being enablers, of offering encouragement to people to develop new skills and achieve greater independence.
- A person told us how happy they were at the service, and how their mental health had improved with the support and understanding of staff. They told us they were looking forward to celebrating Christmas, and why it was so important to them. They spoke of the opportunities they had to make decisions about their day to day life, and their wish to live at the service forever.

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

- Individual support plans provided personalised information relating to what was important for the person, which included their goals and aspirations. These had been signed by them and discussed with a member of staff.
- A person spoke positively about the service they received and their happiness of residing at the service. They were complimentary about the staff and how they knew and understood their day to day challenges, both recognising and respecting what was important to them.
- The person's needs were regularly reviewed, which included discussions amongst the senior management team at monthly meetings, which identified any external resources or actions required to support people.

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.

- Communication needs were considered as part of the assessment process and referred to within the person's support plans.
- The registered manager told us documentation was being reviewed by the provider. This was to ensure documents were designed to better reflect the needs of people using the service, making them easier to understand for people using the service.

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

- Support plans provided information regarding the support people may need to maintain relationships which were important to them, and staff's role in supporting access to the wider community.
- A person told us of the importance of maintaining friendships and of the positive impact it had on them and spoke of their hobbies and interests they pursued at home. They spoke of the activities they enjoyed within the wider community which included visits to shops, cafes and the cinema.

Improving care quality in response to complaints or concerns

- Concerns were recorded, investigated and responded to consistent with the provider's policy.
- Records showed where the person had raised concerns, they had received a letter acknowledging their concern, followed up by a letter detailing the outcome of the investigation and the action taken in response

to the issues raised.

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.

Continuous learning and improving care

- The registered manager was open and honest throughout the inspection and were receptive to our feedback. They spoke of their commitment to continually improve the service to achieve good outcomes for people. The registered manager acknowledged fire drills needed to be implemented, and improvements were needed in medicine management and staff recruitment.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager and staff were committed to the vision and values of the service. They spoke of providing opportunities for people to have their own home, gain maximum independence and to make choices about their day to day lives.
- Staff spoke of the positive and supportive environment in which they worked, where their ideas were listened to and how as a team they worked collectively to achieve the best for people.
- A person told us of the supportive approach of staff and the positive impact it had on them, by increasing their confidence to be independent, make decisions and develop interests.

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 registered manager was aware of the duty of candour. If mistakes were made, they had a duty to be open and honest, issue an apology and take any necessary action.
- The registered manager understood information sharing requirements and had submitted notifications to CQC as required by law.

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

- Opportunities to monitor and review quality performance, including risks were discussed at monthly senior management meetings and staff meetings. Areas for improvement were discussed, and the person responsible for any actions identified were recorded and were reviewed and the next meeting.
- Staff spoke positively of the support provided by the registered manager and senior staff through regular meetings and supervision. Staff told us supervisions provided an opportunity to review their performance, discuss training and talk about the people they supported.
- The person using the service, registered manager and staff were aware of the role of the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf

of the provider. They told us the nominated individual regularly visited the service and found them to be approachable.

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

- The person's views and those of staff were sought through surveys and meetings. Minutes of meetings showed people had shared their views about the challenges of sharing a house with others. People's feedback was then discussed at the staff meeting so staff could support to address the concerns raised.
- We spoke with a person who told us they had completed surveys asking them for their views. They told us staff had helped them to complete it, as they struggled to understand some of the questions. The registered manager told us surveys were being reviewed to better meet the needs of the people using the service.
- A person told us they had raised concerns and that they had been listened to.

Working in partnership with others

- The registered manager and staff liaised with health and social care professionals in relation to the support of people using the service, which included support with the management of issues related to people's care, finances and wellbeing.