

The Royal Masonic Benevolent Institution Care Company

Connaught Court

Inspection report

Connaught Court St Oswalds Road

York

North Yorkshire YO10 4FA

Tel: 01904626238

Website: www.rmbi.org.uk

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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: Connaught Court provides residential and nursing care for up to 90 older people, including people who are living with dementia. 79 people were receiving a service at the time of this inspection.

People's experience of using this service:

People received safe care and support because systems and processes in place ensured any risks were safely managed by staff, and their needs met with minimal restrictions in place.

Medicines were managed and administered safely. Records confirmed people had received their medicines as prescribed

People received care and support from staff who had been assessed as competent to carry out the roles, who were trained and supervised appropriately and who had been appropriately vetted prior to employment.

People were assured of a good service because the provider supported the registered manager to maintain, and where required, improve the service provided.

People, relatives and the staff team were given opportunities to provide feedback on the quality of the service. The provider used the feedback to help maintain and improve standards where this was required.

People received care and support that was individualised and reflective of any specific needs. The service was provided equally and without discrimination.

People and their relatives told us they were confident if they had any complaints the registered manager would address them appropriately.

Rating at last inspection: At the last inspection the service was rated requires improvement (report published May 2018).

Why we inspected: This inspection was a planned inspection based on previous rating

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme.

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 •
Is the service well-led? The service was well-led	Good •



Connaught 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: One inspector, a bank inspector and an Expert by Experience carried out this inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service. Their area of expertise was dementia care.

Service and service type: Connaught Court is a 'care home'. People in care homes receive accommodation and personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at on this inspection.

The service had a manager registered with the CQC. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection: The inspection was unannounced.

What we did: Before the inspection we reviewed information, we held about the service. We reviewed information the provider sent us in the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During our visit we spoke with the registered manager, and four care staff. We spoke with eight people who lived at the home, a health professional, and three visiting relatives. We reviewed documents and records that related to the management of the service. This included, four people's care records, a range of policies, procedures and guidance used by staff in their role, records of safeguarding, accidents, incidents and complaints, audits and quality assurance reports, three staff member files, checks and risk assessments for the environment and records associated with the management and administration of people's medicines.



Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse.

- Staff we spoke with had a good understanding of safeguarding people. Staff could explain the action to take to ensure people were safe and protected from harm and abuse.
- The provider had a safeguarding policy in place. Safeguarding concerns had been reported and acted upon, involving all the relevant professionals when appropriate. People and their relatives told us the service was safe. One person told us, "Yes I feel safe here, all the doors have sensors and no strangers can get in."

Staffing levels.

- We observed sufficient numbers of staff on shift to support people safely. Staff said there were enough staff to meet people's needs safely and they did not feel rushed or under pressure.
- Appropriate recruitment checks were conducted prior to staff starting work, to ensure they were suitable to work with vulnerable.

Learning lessons when things go wrong.

• The registered manager had a system in place to monitor incidents and understood how to use them as learning opportunities to try and prevent future occurrences.

Assessing risk, safety monitoring and management.

- People received care and support safely without unnecessary restrictions in place.
- The provider completed assessments of people's needs. Any identified risks were recorded, and support plans helped staff to reduce the risks when providing assistance. Service records and equipment were safe and well maintained.

Using medicines safely.

• People received their medicines safely as prescribed. One person said, "I sometimes take paracetamol for pain; the staff know what I need and they keep it all safely locked away."

Preventing and controlling infection.

- All the communal areas and people's bedrooms were clean and there were no unpleasant odours. Everybody spoke positively about the cleanliness of the home. One person said, "The staff here keep everything clean and tidy."
- The provider had policies and procedures in place to control and prevent the spread of infections.



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.

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The service was well-run and well-led. Effective systems were in place to manage risks to care quality, which staff understood and used.
- There was a clear staffing structure and staff understood their roles and responsibilities and when to escalate any concerns. One staff member said, "We work as a family, the people, the managers and the staff.
- People told us the registered manager was approachable and they received good support when they needed it. One person said, "[Registered manager] is very aware of the residents and their needs and changes are made as needed."

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility.

- People were supported and encouraged to raise any concerns or complaints.
- Records of people's care needs were regularly evaluated and updated. This meant staff had access to current information that enabled them to provide person-centred care.
- Quality assurance processes were in place to maintain and improve standards of service.
- Systems and processes were in place to review accidents, incidents and safeguarding concerns.

Engaging and involving people using the service, the public and staff.

- Links with outside services and key organisations in the local community were well maintained to promote independence and wellbeing for people.
- People, relatives and visiting professionals had completed surveys of their views and their feedback had been used to continuously improve the service.

Working in partnership with others.

- Staff worked with health and social care professionals to improve the service and outcomes for people.
- People and their relatives were kept informed of any changes and good communications were maintained.

Continuous learning and improving care.

- Staff received appropriate supervision, training and support to develop their knowledge and skills which improved outcomes for people.
- Lessons learnt had been shared and further training sourced from health professionals.