

Margaret Court Limited

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Inspection report

Main Street
Tiddington
Stratford Upon Avon
Warwickshire
CV37 7AY

Date of inspection visit:
08 March 2016

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13 April 2016

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 ●

Summary of findings

Overall summary

We carried out an unannounced inspection at Margaret Court on 08 March 2016.

Margaret Court provides a home care agency service including personal care for up to 50 people who own their own homes within the complex. Margaret Court has three floors with 44 apartments. There are also six bungalows in the grounds. There are communal facilities available which include a lounge area, a dining room, a library and a garden. At the time of our visit there were two people receiving personal care from the Margaret Court staff. The amount of care and support varies from a few hours domestic support each week, to people receiving support up to 24 hours a day. Some people purchased care and support from Margaret Court and others purchased this care and support from other external home care agencies.

Margaret Court had a registered manager in place. 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 told us they felt safe. Staff were confident to report any concerns and were aware of their responsibilities to keep people safe from harm. Staff had been recruited following safe recruitment procedures. People were kept safe through risks being identified and well managed. People received support receiving their medicines as prescribed.

People received care and support from staff who had received training to meet their individual needs. Staff were given opportunities to meet regularly with their seniors to reflect on their practice and continually improve their performance. The registered manager and staff had a good understanding of the Mental Capacity Act 2005 and staff promoted and respected peoples' choices and decisions. People were supported to receive the healthcare services they required.

People received care and support from caring and kind staff and were treated with respect and dignity. Staff were compassionate towards people and assisted people to retain their independence and make their own decisions about their life style choices.

Peoples' individual needs were at the centre of the service offered and provided. Staff responded to peoples' changing needs. People were encouraged to express their views about the service and where suggestions for improvements were made, staff acted on these to improve the quality of services delivered.

The registered manager and senior team were well respected, were accessible and provided effective leadership. The vision and values of the service were clearly communicated to and understood by staff. Systems to monitor the quality of the service were in place and used to inform decisions in order to make improvements where required.

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 told us they felt safe. Staff were confident to report any concerns and were aware of their responsibilities to keep people safe from harm. Staff had been recruited following safe recruitment procedures. People were kept safe through risks being identified and well managed. People received support receiving their medicines as prescribed.

Is the service effective?

Good ●

The service was effective.

People received care and support from staff who had received training to meet their individual needs. Staff were given opportunities to meet regularly with their seniors to reflect on their practice and continually improve their performance. The registered manager and staff had a good understanding of the Mental Capacity Act 2005 and staff promoted and respected peoples' choices and decisions. People were supported to receive the healthcare services they required.

Is the service caring?

Good ●

The service was caring.

People received care and support from caring and kind staff and were treated with respect and dignity. Staff were compassionate towards people and assisted people to retain their independence and make their own decisions about their life style choices.

Is the service responsive?

Good ●

The service was responsive.

Peoples' individual needs were at the centre of the service offered and provided. Staff responded to peoples' changing needs. People knew how to raise concerns or complaints and were confident their concerns would be investigated thoroughly and acted on.

Is the service well-led?

Good 

The service was well-led.

The registered manager and senior team were well respected, accessible and provided effective leadership. People were encouraged to express their views about the service and staff acted on these views to improve the quality of services delivered. The vision and values of the service were clearly communicated to and understood by staff. Systems to monitor the quality of the service were used to inform decisions in order to make improvements where required.

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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 checked whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 08 March 2016 and was unannounced. The inspection was carried out by one inspector.

Before we visited Margaret Court we checked the information that we held about it. We looked at the statutory notifications that the service had sent us. A notification is information about important events which the provider is required to send us by law.

We spoke with 15 people and four relatives of people who lived in their own homes in Margaret Court. We also spoke with six staff members in addition to the registered manager. We spoke with two visiting care staff from external home care agencies. We looked at a range of records about peoples' support and care including five care plan files. This was to assess whether the care people needed was being provided.

We reviewed records of the checks the registered manager and the provider made to assure themselves people received a quality service. We also looked at personnel files for four members of staff to check that safe recruitment procedures were in operation and that staff received appropriate support to continue their professional development.

Is the service safe?

Our findings

People told us they felt safe living at Margaret Court and in the company of the staff working there. One person told us, "I feel very safe here at all times. No one can just come in, everyone is vetted and checked." Another person told us, "Security here is tip top, I feel so safe and at all times." Relatives told us they felt their relatives were very safe. One relative told us, "I am particularly reassured, as is my 'relative' that there are staff available 24 hours a day and seven days each week."

Staff we spoke with had a good understanding of what the signs of abuse were and how to report any concerns they had should they suspect abuse. Staff had received training in keeping people safe and we saw staff training records which confirmed this. Staff said they were able to raise any concerns with the registered manager and they knew their concerns would be taken seriously. Staff told us if they were not, they felt confident to report any concerns under the provider's whistle blowing procedure. This is where staff can anonymously report any concerns they have to external organisations, such as the local authority or Care Quality Commission.

The care and support plans we looked at included risk assessments which identified hazards people might face. These included risks of falling, fire and use of kitchen equipment. There was guidance available about actions staff needed to take to reduce the risk of harm. People were supported to take responsible risks as part of their daily lifestyle without any unnecessary restrictions. One person told us, "I am very independent here but I know if I need extra support I can request it and it will be available."

If people had not been seen nor had contact by staff during the day, a courtesy call was made to check that people were safe and well later during the afternoon and early evening. Each apartment and bungalow had a phone and an alarm call system should people need to summon help from staff. There were red pull-cords in every room in peoples' flats and bungalows and in all communal areas of the building. An orange button was located in the hallway of all apartments which enabled people to speak to the duty manager at any time, day or night. We spoke with a number of people who also wore an alarm pendant. This enabled them to move safely throughout the premises with confidence that staff could be called for assistance at any time. All alarm calls were recorded by the duty managers. This showed us the provider continually assessed the health and safety of people to reduce risk and keep people safe.

We were invited into a number of peoples' homes and saw that risks were well managed. One person said, "I have everything laid out exactly where I know it is, to assist me to get around my flat safely." We saw that people had their specialist needs taken account of with a variety of mobility aids and equipment available in their homes to ensure their safety.

There were sufficient numbers of staff available to keep people safe. The duty manager told us that staffing levels were determined by the number of people and their support and care needs. One staff member said, "Oh yes we have time to get our work done and also make sure our 'owners' are fine." The duty manager showed us the staff rotas and explained how staff were allocated their work. There was always a duty manager on shift during the day and awake every night, seven days every week. They said when there was a

shortfall of staff, for example, when staff were unwell or on holiday, existing staff worked additional hours which, ensured continuity in the service provided to people.

Recruitment processes helped minimise the risks of employing unsuitable staff. We spoke with staff who confirmed that reference checks and checks with the Disclosure and Barring Service (which provides information about peoples' criminal records) had been undertaken before they had started work. We looked at four staff files and were able to confirm checks had been undertaken before staff began work at Margaret Court.

Many people who lived at Margaret Court were completely independent in taking their own medicines. Those people who needed help or prompting to take their medicine told us they were happy with the way staff supported them with this. All of peoples' medicine was individually dispensed from a pharmacy of their choice. All staff had received training on medicines before being able to assist people to take their medicines.

The communal premises were clean and well maintained to prevent any risk of the spread of infection.

Is the service effective?

Our findings

We asked people about their experiences and views on whether staff were sufficiently skilled and experienced to care and support them to have a good quality of life. One person told us, "The staff here are excellent and well trained. They meet all my needs very well indeed." One relative told us how effective and flexible the staff had been following a physical health procedure their relative had received. This had resulted in them requiring increased assistance with personal care for a period of time. They said, "We were really impressed how the staff responded and were able to step up support quickly and effectively."

All of the staff we spoke with said they met regularly with their registered manager or duty managers to think about how effectively they supported people. We looked at staff files which confirmed that staff met up with their seniors and in addition they received an appraisal which gave them an opportunity to discuss their roles and options for development.

Staff we spoke with told us they were well supported by other staff members, the duty managers and the registered manager. They said they received training that enabled them to carry out their work effectively. Staff told us they had completed several training courses over the last year and had put this training to good use and used the skills and knowledge to better support peoples' needs. For example one staff member told us they used skills learnt in a dementia training session to diffuse situations where agitation and anxiety were increased with one person living with dementia. We saw there were comprehensive training records in place and that further training had been planned which included a refresher course on The Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards. The training records showed evidence of continuing development and learning. All staff had achieved or were undertaking diplomas in health and social care to further develop their knowledge and skills. Staff told us they completed induction training and had worked alongside more experienced staff for a period of time to help them to get to know people and how they liked their care and support to be provided. Staff had a good understanding of risk management and were able to confidently discuss how they identified hazards and dealt with emergencies. All of this knowledge and information supported people to stay safe in their own homes.

The Mental Capacity Act (2005) provides a legal framework for acting and making decisions on behalf of people who lack the mental capacity to make specific decisions for themselves. The duty manager told us everyone who received a service had capacity to make decisions about their care and support. People had signed documents within their personal files and where appropriate in care and support plans. This was to show that the person agreed with the care and support package planned and provided.

Members of staff and the duty manager demonstrated a good understanding of the MCA and what this meant on a day to day basis when seeking peoples' consent. One staff member said, "People here make their own decisions and have absolute choice in everything they do and in deciding what support they receive." Staff had access to policies and procedures to guide them. We saw staff gave an explanation to people and waited for them to respond before they helped them to undertake care or support tasks.

People highly commended the quality and choice of food offered, if they chose to eat lunch in the restaurant

provided in the communal areas of the building. One person told us, "The food here is excellent, just marvellous." People we spoke with told us they were very happy with the levels of support given to them in regard to food and drink. Where requested people could purchase a three course lunch served every day in the communal dining room. If someone was for example, feeling unwell, staff would take lunch to the person's apartment. At other times people self-catered or where appropriate received staff support with meal preparation.

If requested staff assisted people to attend healthcare appointments, although staff told us most people arranged their own doctor, dentist or optician. One person told us, "My health has never been better with all of the support available here. I am very well looked after and have access to any community health services I need." Staff members told us if people became unwell then they would call either a GP or an ambulance and would stay with the person until help arrived. This ensured people who used the service received the health care support and checks they required.

Is the service caring?

Our findings

People told us they were happy with the support they received from staff. One person told us, "The staff here are excellent, a fine group of people, we are like one big happy family." They added, "This is the most delightful place I could possibly choose to live in." Another person told us that caring and positive relationships were developed with staff. This person told us, "You can train staff in a whole manner of topics but you can't train to really care. The staff here genuinely care about us, we would know otherwise."

We saw that staff always greeted people politely, asked about their welfare and took time to listen to what people said. People engaged in conversations with staff and the atmosphere at Margaret Court was calm and relaxed. For example, staff asked if a group of people would like some tea and coffee served whilst they chatted together in the lounge area. Staff responded enthusiastically as one person was organising for a table of their guests to join lunch in a few weeks' time. The person was given some menu choices and asked if their guests had any specific dietary requirements.

Support delivered was in the main pre-booked and agreed in advance with people. We saw that staff had time to respond flexibly to peoples' needs and to focus on their wellbeing. For example one person requested assistance with some technical equipment in their apartment, which was very important to them and we saw staff made a time to attend to the issue. We saw many examples of this approach as people either telephoned or popped into the office with queries or requests. Staff were receptive and positive in response to all of the queries made from the main office.

Peoples' care plans were written in a person centred way. This is a way of ensuring that care is focused on the needs and wishes of the individual. Peoples' care plans included information about what was important to them such as their interests, past family and working life and details of what help they required to support them.

Staff we spoke with were confident in how they promoted dignity and privacy in their everyday practice by ensuring they knocked on everyone's front door before entering, even if the person might have left the door ajar. We saw staff were respectful towards people by kneeling down or sitting next to people so they were on the same level and not speaking over them.

All personal and confidential information about people was stored securely and there were policies and procedures, which staff followed to protect peoples' confidentiality.

Is the service responsive?

Our findings

The apartments and bungalows at Margaret Court were independent dwellings purchased by people directly. Discussions were held with people before they started using services on how the various aspects of housekeeping support and the provision of personal care could meet their needs. This information was then used, if needed, to complete and develop a more detailed care and support plan which provided staff with the information and guidance to deliver appropriate and agreed levels of care. We found care and support plans were developed directly with people to agree how they would like their care and support to be delivered. The support plans contained details of peoples' health and support needs. People received an, 'owner's handbook' which gave detailed information about the organisation and services available. We asked people if they were familiar with the handbook and if they found the information useful. One person said, "Yes the handbook had useful information included which helped prepare me for the move and to understand what services are on offer." We were told that the handbook was regularly reviewed and updated to ensure all information was current, up to date and relevant.

Where people received care and support, the plans were kept in peoples' homes and were kept up-to-date by duty managers so that they provided staff with the information they needed to meet people's needs. Any changes to care and support packages were communicated to all staff and comprehensive information was recorded by the duty manager in a handover book to ensure all staff were aware of any changes to care or agreements made. Duty managers told us this system worked well and kept them all up dated and informed. People told us they had been involved in developing their care and support plans and that their needs were reviewed regularly with them. People received support from a stable and consistent team of staff who knew peoples' preferences, routines and individual needs. People we spoke with confirmed that they had reliable and regular staff to support them and knew the times of their visits and were generally kept informed of any changes.

Throughout our visit to Margaret Court we saw that people were encouraged to be as independent as possible regarding every aspect of their daily living choices, routines and tasks which needed to be done. For example, we spoke with a number of people who undertook regular work outside of Margaret Court, some on a voluntary basis. We spoke with a number of people who were actively involved in the provider's board of directors with associated roles and responsibilities such as staff recruitment and planning social events, this on behalf of all of the people who lived at Margaret Court. Many people went out of Margaret Court independently pursuing their day to day business and of their own choosing. One person told us, "I am as independent now as I was before I lived here however support is available as and when, and if I need it."

People told us they were supported to follow their interests and take part in social activities and, where appropriate, education and work opportunities. People were able to take part in a wide range of creative activities which they had suggested. This included themed lunch events for special occasions, arts and crafts, visiting external speakers, music recitals, cinema evenings and a variety of outside trips. The activity programme was reviewed every month and people who used the service played an active part in deciding its content. One person who used the service and was also a board director, co-ordinated all requests for activities. On the day of our visit we spoke to one person who was looking forward to the evening trip out to

a concert. We heard the service used a local taxi firm's minibus for group activities and trips. One person who used the service said, "What I really love is there is no pressure to have to do any of the activities. We have total freedom to decide what we want to do and when we want to do it. When you look at how wonderful the activities are though, we seldom refuse." One relative we spoke to described how independent and proud their relative was and how this was respected consistently by all of the staff. They said, "It has all been about identifying what my relative's priorities are. Through this person centred approach my relative feels valued and respected and in such a short space of time I have seen huge improvements in their confidence."

Links had been made with the local community which assisted people to maintain links with external organisations. For example, the local residents' association used the Margaret Court library for their meetings and people contributed to these on a regular basis.

People were encouraged and supported to develop and maintain relationships with people who mattered to them and in turn to avoid social isolation. For example, one person told us, "Some very close relationships develop here, there is no pressure but we watch out for each other and we are as one family really." People told us they invited guests whenever they wanted to and that guests were positively encouraged to be a part of the community. Two guests' suites were available for guests to stay at Margaret Court for a modest fee which meant visits were not rushed or limited by travelling distances.

People told us there were regular, 'owners' meetings held with staff. In addition regular board meetings with the peoples' chosen representatives and the board of directors were held. This gave people an opportunity to offer their opinions and influence how the service operated. People told us about recent topics of discussion and changes which had been implemented following suggestions from people at meetings. For example, Wi-Fi was now available throughout Margaret Court. Access to the car park had been reviewed due to health and safety concerns and social events had been agreed. We saw a record of recent meetings and saw they were well attended by people and their views were being sought. One person told us, "I do try to go to the 'owners' meeting as my ideas are always picked up and acted on."

People and their relatives said they knew how to raise any concerns they had and they were familiar with the complaints procedure. Everyone we spoke with said the registered manager and duty managers were always available if needed if they were not satisfied with any aspect of the service. At the time of our visit there were no complaints being investigated or any complaints made in the preceding year.

Is the service well-led?

Our findings

At the time of our visit Margaret Court had a registered manager who was supported in their role by six duty managers. We were told and saw on the staff rota there was always a duty manager available on a full-time basis, 24 hours each day. The management team had a detailed knowledge of people who used the service and their families and their individual needs. Throughout our visit we saw there was an open and welcoming atmosphere at Margaret Court. People told us how proud they were of Margaret Court and said the registered manager and their duty managers were highly motivated to provide a good service to people. One person told us, "I am so very happy to be living here, I have no regrets at all. The manager cannot do enough to make sure this is the best service it can possibly be." Another person told us, "The manager does a very fine job indeed, full marks." A relative told us, "I cannot speak highly enough of the manager here, nothing is too much trouble."

We saw there was a clear vision and ethos at Margaret Court about enabling people to live as independently as possible and giving people choice with every aspect of their lives. This was advertised in the handbook given to people and on information leaflets available about Margaret Court. One person told us, "I'm not sure how we could improve? Of course there are always things that could be improved upon but I'm hard pushed to think what." People who used the service and their relatives had regular opportunities to give feedback, either individually during the registered manager's daily quality walkabouts, or collectively in meetings, or via the annual surveys. Staff spoke with passion and warmth about wanting to provide a high quality service for people and they very much enjoyed working at Margaret Court. One staff member said, "Our 'owners' are fabulous and it's a delight working here and with such lovely people."

Staff said they felt very well supported in their role and spoke positively about the registered manager and the duty manager support, which was available at all times, night and day. Staff said they felt listened to and could contribute suggestions or raise any concerns if they had any. One staff member said, "This work is a pleasure, having contact with our 'owners' and their families is wonderful. I am very well supported, this is work without any stress, super really."

We spoke with staff about the regular staff meetings and looked at the minutes of those meetings. We saw the registered manager regularly raised quality concerns and informed staff of any changes or improvements needed. We saw that subsequent meetings confirmed actions taken and dates of when the actions had been completed. One staff member said; "We are encouraged to give our views by our manager and our ideas are always listened to." We were given one example of the cleaning schedules and one staff member reminding all staff to clean tiles in the bathrooms. We saw that this was added onto the schedule following the discussion.

The provider had a system of audits to monitor various aspects of the quality of care, the environment and health and safety checks. These had been consistently carried out. For example, people who received personal care from the staff were asked regularly via a satisfaction questionnaire for feedback about the quality of the care they received. Duty managers carried out unannounced spot checks to ensure services were being delivered consistently and to a high standard. Any incidents or accidents were reported by each

duty manager and stored both in peoples' personal records and the duty manager communication file. Where audit checks had taken place, we saw that action had been taken to improve service delivery. For example people and staff had been reminded that any unexpected and unknown visitors to Margaret Court must report to the duty manager before entering the premises. This ensured the safety of the premises was protected at all times.