

Moordale Court Company Limited

Moordale Court

Inspection report

4 Moordale Court
Lingdale
Saltburn By The Sea
North Yorkshire
TS12 3DX

Tel: 01287652948

Date of inspection visit:
17 January 2023
19 January 2023
27 January 2023

Date of publication:
14 February 2023

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

About the service

Moordale Court is a residential care home providing personal care to up to 3 people with a learning disability. At the time of inspection 3 people were living at the home, which is based in one adapted building.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support: People received the right support with their medicines. Staff focused on people's strengths and promoted what they could do, so they had fulfilling and meaningful lives. Staff supported people to take part in activities and pursue their interests in their local area, which they were doing during our inspection. 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.

Right Care: People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to their individual needs. Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it. The service had enough appropriately skilled staff to meet people's needs and keep them safe. People received care that supported their needs and aspirations, was focused on their quality of life, and followed best practice.

Right Culture: People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the management and staff. People received good quality care, support and treatment because trained staff and specialists could meet their needs and wishes. Staff knew and understood people well and were responsive, supporting their aspirations to live a quality life of their choosing. Staff turnover was very low, which supported people to receive consistent care from staff who knew them well. Staff placed people's wishes, needs and rights at the heart of everything they did. People and those important to them, including advocates, were involved in planning their care.

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

Rating at last inspection

The last rating for this service was good (published 9 February 2018).

Why we inspected

We undertook this inspection as part of a random selection of services rated Good and Outstanding.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Moordale Court

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

An inspector and a pharmacist specialist carried out this inspection.

Service and service type

Moordale Court is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Moordale Court is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us

annually with key information about their service, what they do well, and improvements they plan to make.

During the inspection

We spoke with 2 people and 5 relatives about their experience of the care provided. We reviewed a range of records. This included 3 people's care records and 3 medicine administration records, with accompanying documentation. We spoke with 7 members of staff, including the registered manager, nominated individual and support staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also spoke with an external professional.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- People were comfortable and safe at the service. One relative told us, "It is safe as far as I can see and [named person] has been settled there."
- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well. Risks to people were assessed and action was taken to reduce the chances of harm occurring.
- The premises and equipment were monitored to ensure they were safe to use. Required test and safety certificates were in place.
- Plans were in place to support people in emergency situations. However, we saw that fire drills were not being carried out in line with the provider's policy. We discussed this with the registered manager, who said it would be immediately reviewed.

Using medicines safely

- Medicines were managed well and medicines administration records were clearly written. Some handwritten entries required countersigning as per national guidance. Information and guidance was available for staff to ensure medicines could be given safely and this was reviewed regularly.
- Medicine training and staff competency assessments were in place.
- We saw some medicine records were unclear or inconsistent, for example those for some topical medicines and as and when required protocols. We discussed this with the registered manager, who said this would be addressed immediately.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. One member of staff told us, "I would report any concerns I had, we all would. The people here are like an extended family to us."
- The service managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately and managers investigated incidents and shared lessons learned.

Staffing and recruitment

- The service had enough staff, including for one-to-one support for people to take part in activities and visits how and when they wanted. Rotas were planned flexibly around people to give them the freedom to do what they wanted when they wanted.
- Staff told us there were enough staff at the service to support people safely. One told us, "We always have enough staff on."
- The provider's recruitment processes minimised the risk of unsuitable staff being employed. These

included interviews, exploring gaps in employment histories and obtaining references.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

- The provider supported safe visiting to the service. Relatives said no restrictions were placed on visiting. One relative told us, "We can visit whenever we want and we always get an update when we do."

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.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff knew about people's capacity to make decisions through verbal or non-verbal means and this was well documented.
- For people that the service assessed as lacking mental capacity for certain decisions, staff recorded assessments and any best interests decisions. However, these had not always been effectively recorded. For example, though relatives and external professionals were involved this was not always documented. The registered manager said this would be addressed and records updated.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People had care and support plans that were personalised, holistic, strengths-based and reflected their needs and aspirations, included physical and mental health needs. These were regularly reviewed to ensure they met people's choices and needs.

Staff support: induction, training, skills and experience

- Newly recruited staff followed the provider's induction programme, which helped them to deliver effective support. This included getting to know the people at the service and learning about policies and procedures.
- Staff received regular training that was relevant to their role. The service checked staff's competency to ensure they understood and applied training and best practice. One member of staff told us, "The training is fantastic, mine is up to date and you can do extra."
- Staff received support in the form of continual supervision, appraisal and recognition of good practice. One

member of staff said, "I can raise anything in supervisions and know it will be sorted."

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care

- People received support to eat and drink enough to maintain a balanced diet. Where necessary people's dietary intake was monitored to help them to stay at a healthy weight. We saw people could access drinks and snacks between meals.

Supporting people to live healthier lives, access healthcare services and support

- People were referred to health care professionals to support their wellbeing and help them to live healthy lives. Care plans contained evidence of effective partnership working with healthcare services.

Adapting service, design, decoration to meet people's needs

- People's care and support was provided in a safe, clean, well equipped, well-furnished and well-maintained environment which met people's sensory and physical needs. One external professional told us there "was more of a 'family home' feeling to Moordale Court than a care home."
- During the inspection we saw that people appeared to be comfortable and content at the service, spending time in either the communal lounge or their rooms as they wished.

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.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People received kind and compassionate care from staff who used positive, respectful language which people understood and responded well to. We saw numerous examples of kind and caring support during our inspection.
- Relatives told us people received caring support from staff who respected them as individuals. Comments included, "I think the staff are very good and they know [named person] so well" and, "They do whatever [named person] wants. I feel they really know [named person] and help to do what [named person] wants."
- Staff saw people as their equal and created a warm and inclusive atmosphere. One member of staff told us, "We do all sorts of things with people, it is all about them and what they want."

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

- Staff knew the people they supported very well, and in many cases had supported them for years. They were able to describe in detail the kinds of things people liked and to help them do what they wanted. A relative told us, "[Named person] can make their own choices, and they help [named person] to decide."
- During the inspection we saw staff offering people choices over all aspects of their daily routine, and respecting the decisions people had made. For example, one person was supported to choose the activity they wanted to do and staff helped them to carry this out.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect. During the inspection we saw staff were friendly but respectful towards the people they supported. One relative we spoke with said, "The staff are all polite and respectful."
- Staff knew when people needed their space and privacy and respected this. We saw examples of plans and routines changing when it was clear people wanted to spend some time on their own.
- People had the opportunity to try new experiences, develop new skills and gain independence. Staff were guided by people on what they wanted to do. One relative told us, "They always put [named person] first."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last inspection we rated this key question good. The rating for this key question has remained 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

- Staff provided people with personalised, proactive and co-ordinated support in line with their communication plans, sensory assessment and support plans. Relatives told us that staff supported people in ways that met their needs and choices.
- Care plans were regularly reviewed to ensure they reflected people's needs and preferences. People were not always able to contribute directly to these reviews, but relatives confirmed they were asked to take part to help ensure people's voices were heard. One relative said, "I am always invited in for reviews and meetings and get sent the minutes if I can't make it."
- Staff spoke knowledgeably about tailoring the level of support to individual's needs, and we saw them applying this knowledge when they were supporting 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.

- Staff had good awareness, skills and understanding of individual communication needs, they knew how to facilitate communication and when people were trying to tell them something.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to participate in their chosen social and leisure interests on a regular basis. When we inspected we saw people participating in activities that helped them develop relationships and avoid isolation. One relative told us, "The staff are always taking [named person] out to places that [named person] wants to go. [Named person's] personality really comes out through living there."

Improving care quality in response to complaints or concerns

- Systems were in place to investigate and respond to complaints or concerns. Where these had been raised we saw evidence that improvement actions had been taken. One relative told us, "I have no complaints but would know who to speak to if I did."

End of life care and support

- At the time of our inspection nobody was receiving end of life care. Systems were in place to provide this in

a way that responded to people's preferences should it be needed.

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.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 provider and registered manager worked hard to instil a culture of care in which staff truly valued and promoted people's individuality, protected their rights and enabled them to develop and flourish. One relative told us, "I just want [named person] to be safe, happy and live her life to the full. That is what she does there."
- Staff spoke positively about the culture and values of the service, which were focussed on the people they supported. One member of staff we spoke with said, "It is wonderful here, we're a strong team and all help each other."
- Staff gave honest information and suitable support, and applied duty of candour where appropriate. One relative told us, "Communication is good with the family."

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

- Effective systems were in place to monitor and improve standards at the service. Audits were carried out to identify and address issues. Improvement action was taken where needed.
- Staff were able to explain their role in respect of individual people without having to refer to documentation. A relative told us, "The staff know [named person] so well, it is a real reassurance and we don't have to worry."

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

- Staff encouraged people to be involved in the development of the service. During the inspection we saw people were involved in decisions, such as meal planning and where they wanted to spend time.
- People, and those important to them, worked with managers and staff to develop and improve the service. A relative we spoke with said, "They get in touch with any changes, and also ask if anything needs changing."

Continuous learning and improving care; Working in partnership with others

- The provider had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible. The service was tailored to meet the specific support needs of the people living there.
- The service worked well in partnership with other health and social care organisations, which helped to

give people using the service a voice and improve their wellbeing. An external professional told us how staff had worked with them to help develop a routine for a person that suited them.