

Minster Court (Bracebridge Heath) Limited

# Minster Court Limited

## Inspection report

off York Way  
Bracebridge Heath  
Lincoln  
Lincolnshire  
LN4 2TS

Tel: 01522521212

Website: [www.retirementsecurity.co.uk](http://www.retirementsecurity.co.uk)

Date of inspection visit:  
19 August 2019

Date of publication:  
16 September 2019

## 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

People purchased the support they wished to receive. This included cleaning and laundry services, personal care and the provision of meals. Those we spoke with told us their needs were met by the service.

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

People received safe care. Procedures were in place to help protect people from the risk of harm and abuse. Medicine management was robust. Staffing levels were monitored and there were enough skilled and experienced staff to meet people's needs.

People were supported to have maximum choice and control of their lives and staff them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Staff received appropriate induction, training, and support and applied learning effectively in line with best practice. This led to good outcomes for people and supported a good quality of life.

Staff were caring and kind. People we spoke with confirmed this. Information was provided to people in a format they could understand.

Person centred care records and risks assessments were in place to inform staff about people's needs. The care provided was reviewed by staff to help people maintain their wellbeing.

People were supported and encouraged to maintain their independence. Health care professionals were contacted by staff when people requested this support or in emergencies.

People could raise complaints. This information was used to improve the service. A good programme of activities was in place for people to take part in, if they wished.

The service was well-led. Continuous improvement, learning and innovation was implemented. Quality checks and audits were in place to monitor the service. Action plans were created when shortfalls were found to ensure corrective action was taken. Data security was maintained.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection

The last rating for this service was good (16 March 2017).

Why we inspected

This was a planned inspection based on the previous rating.

### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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.

# Minster Court Limited

## **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 Care Act 2014.

#### Inspection team

The inspection was undertaken by one inspector.

#### Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

#### What we did before the inspection

We looked at all the information we had received since the last inspection.

The provider completed a Provider Information Return. We used the information the provider sent us in the PIR. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We asked the local authority and Healthwatch for their views. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

#### During the inspection

We spoke with three people living at Minster Court about their experiences of the service. We spoke with the registered manager, relief manager, four staff and chef.

We reviewed a range of records. This included three people's care records. We looked at three staff files in relation to recruitment, supervisions and appraisals. We reviewed a variety of records relating to the management of the service, including policies, procedures, checks and audits.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Staff undertook safeguarding training. Staff confirmed they would report safeguarding concerns immediately.
- The registered manager was aware of their responsibilities to report safeguarding issues when they occurred to all relevant external bodies.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's wellbeing were assessed, monitored and reviewed. Staff gained help and advice from relevant health care professionals to reduce risks to people's health and wellbeing, where necessary.
- People were encouraged and supported to take positive risks to develop or maintain their independence.
- Accidents and incidents were recorded. Investigations were completed and action was taken to help prevent any further re-occurrence. This information was shared with staff to maximise their learning and to promote robust health and safety at the service.

Staffing and recruitment

- People's needs were met in a timely manner by suitably skilled staff who were deployed to work across the service. Staff told us, "There are enough staff. We work as a team."
- The provider had robust recruitment checks in place to ensure staff were suitable to work in the care industry.

Using medicines safely

- People were encouraged to manage their own medicines, where possible. One person told us, "Staff prompt me to make sure I get my medicines."
- Staff undertook training about how to manage medicines safely. The provider had policies and procedures in place to guide the staff.
- Medicine checks and audits were carried out, issues found were addressed.

Preventing and controlling infection

- Robust infection prevention and control measures were in place. Staff ensured infection prevention and control measures were followed. Staff were provided with personal protective equipment to prevent the spread of healthcare related infections.
- People living at the service undertook their own cleaning, laundry and cooking where possible. People who required assistance with this were supported by staff and a payment was made for these services.

# 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 the last inspection this key question was rated as good. At this inspection this key question remained the same. 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

- A full assessment of people's needs were undertaken prior to people completing the purchase of their property. One person told us "They assessed my needs."
- The management team implemented good practice ideas and supported improvements to the service to promote better outcomes for people receiving personal care.

Staff support: induction, training, skills and experience

- People confirmed staff were skilled and knew what they were doing. One person told us, "The staff are trained." The management team reviewed the deployment of staff to make sure people requiring personal care were supported by staff who had the skills, experience and knowledge to meet people's needs.
- New staff completed induction training. All staff completed a programme of training to develop or maintain their skills. A member of staff told us, "There is loads of training. We have to do it and we have a test." Training was monitored by the management team.
- Staff had supervisions and appraisals. Staff told us they found this support helpful. A member of staff said, "I have supervision and an appraisal. We are asked if there is any more training we feel we need."

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

- People received food in line with their dietary requirements and preferences. Information about people's special diets and food allergies was recorded and known by the chef and staff. A balanced diet was available and was promoted by the chef.
- Monthly menus were provided. Meals could be provided for people living at the service and for their visitors, for a charge. One person told us, "The food is good. We have three course meals. I can cook for myself if I choose."
- Themed meals were served on special occasions for example on Valentine's Day. Catering for birthday parties, anniversary 's and other events was provided upon request.

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

- People contacted relevant health care professionals to maintain their health and wellbeing. Where necessary and in an emergency staff contacted people's GP's or the emergency services and followed their advice. People's relatives were kept informed by staff. A person told us, "If I was unwell the staff would get the doctor for me."
- People requested support from staff when they required help with personal care or domestic services. One person told us, "The staff are here when needed." Staff were aware of people's needs, risk's and goals.



People were encouraged and supported to live their lives.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act 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 make 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 living at the service had capacity. The registered manager had an understanding about the principles of the MCA and support would be provided to people who lacked capacity.
- People confirmed staff asked for their views and sought their consent before providing care and support.

# 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 the last inspection this key question was rated as good. At this inspection this key question has/remained the same. 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

- The service promoted a person-centred culture. Staff built positive relationships with people and communicated with kindness and compassion, listening and acting on what people said. Staff talked with people about things that mattered to them.
- People confirmed staff were caring and kind. People told us, "I cannot fault the staff. They are polite and caring", "The staff are very good. They look after me exceptionally well" and, "They are very caring staff and they notice if I am not quite myself."
- Staff were passionate about supporting people. Staff told us, "I love working here, working with the owners to promote their independence and making sure they are happy" and, "The people I work with are all so friendly and nice."
- People were supported to maintain their relationships with family and friends. Visitors to the service were made welcome.
- People's equality, diversity and human rights were respected by staff. Personal care and support was delivered in a non-discriminatory way; people were supported to follow their faith and live their life as they chose.

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

- People who received personal care and support made their own decisions about the help they wished to receive.
- People were encouraged to express their views about their care and set goals to achieve, where possible. The registered manager told us, "People have moved on if staff could no longer meet their needs."
- Independent support was available to assist people with making decisions, where necessary.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was protected. Personal care was delivered in bedrooms or bathrooms behind closed doors. One person told us, "Staff knock on my door before entering to respect my privacy."
- People were supported and encouraged by staff to achieve their goals and maintain their well-being.
- People's independence was promoted and their care records contained information about tasks they could undertake themselves and what they required help with.
- People were satisfied with the help they received from staff. People told us, "Staff go above and beyond what they need to do for me" and, "Staff ask me what I need and act on what I say."
- Information was stored securely to ensure confidentiality and data security was maintained.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question remained the same. 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

- People received individualised care from staff. People's likes, dislikes and preferences for their support were recorded and staff acted upon this information. Staff supported people to make decisions about their care
- People's records were updated as their needs changed. A member of staff told us, "We update people's records when changes occur and write this in the report book. We inform relatives, GP's or nurse's. We make sure the care records are up to date."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were assessed. Staff understood how people communicated for example with the use of hearing aids or sign language.
- Information was provided to people in a format that met their needs.
- The service promoted effective communication. Sign language and lipreading courses were provided for people living at 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

- An activities programme was in place which had been developed in line with people's interests and hobbies.
- Communal areas were available for people to use.
- Staff encouraged people to maintain and develop their contact and relationships with family and friends to avoid social isolation. For example, people could invite family and friends over to have a meal.

Improving care quality in response to complaints or concerns

- There was a complaints policy and procedure in place which people were aware of. The management team monitored 'niggles' along with complaints and learnt from issues raised
- People were able to raise issues and complaints. We received the following comments, "I am forthright and would not hang around in saying something if I needed to" and, "I would raise issues, but I have never needed to."

#### End of life care and support

- People's wishes for end of life care were recorded, this included their spiritual needs and preferences, where people wished to share this information.
- The registered manager told us people generally had moved from the service before they required end of life care. If end of life care was provided this was arranged by family members who supported their relative with the help of relevant health care professionals.

# 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 the last inspection this key question was rated as good. At this inspection this key question remained the same. This meant 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 registered manager was aware about the events that occurred at the service they needed to notify CQC about.
- Checks and audits were undertaken. The manager had oversight of the service and developed action plans to address any issues found.
- People were asked for their views in conversation, at meetings and through surveys. One person told us, "There are meetings to go to and surveys. I am happy with the staff and manager." Information received was used to improve the service provided.
- Staff understood their roles and responsibilities. A member of staff told us, "There is a good group of staff we all rely on each other."

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

- People received a person-centred service that met their needs. The management team monitored the service to ensure staff met the provider's standard of care.
- Policies and procedures were in place to guide staff about how to deliver care in an open and transparent way.
- Staff said the management team were approachable and supported them appropriately. One member of staff told us, "The manager is kept up to date and they are nice to work for."
- A member of staff was available outside of normal working hours to support people.
- The registered manager was aware of their duty of candour responsibilities including responding appropriately when things go wrong.

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

- Residents Meetings were held so people could raise their views.
- Staff were aware of and respected people's diverse needs.
- The management team spoke with people to check if they remained satisfied with all aspects of the service.
- Staff meetings were held. A member of staff told us, "Staff meetings are held quite regularly. Any issues, we

ask for a meeting with the manager or we raise them."

Continuous learning and improving care; Working in partnership with others

- The registered manager reviewed accidents that occurred and acted to reduce further re-occurrence.
- Staff worked in partnership with people's social and health care services to make sure their needs were met.
- The management team reviewed the staff 's performance any concerns found were addressed and staff were supported to improve.