

# Review of compliance

<b>Methodist Homes Callin Court</b>	
<b>Region:</b>	North West
<b>Location address:</b>	Grey Friars Chester Cheshire CH1 2NW
<b>Type of service:</b>	Domiciliary care service Extra Care housing services
<b>Date of Publication:</b>	March 2012
<b>Overview of the service:</b>	<p>Callin Court is an Extra Care housing service for people aged 55 and over, run by Methodist Homes.</p> <p>The complex consists of fifty self-contained flats where tenants are visited by staff at agreed times to support them with daily living tasks. There are also a number of communal areas within the complex, including a restaurant, where tenants can choose to relax and meet</p>

	<p>with other tenants. Staff are available day and night to deliver support to the tenants.</p>
--	---

# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Callin Court was meeting all the essential standards of quality and safety.**

The summary below describes why we carried out this review, what we found and any action required.

### Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

### How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 28 February 2012, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

### What people told us

We spoke with five people who were receiving a service. All said they had been asked what their needs were before they moved into Callin Court and the manager had discussed with them the care the service could provide. One person told us that they were staying at Callin Court on a trial basis for two weeks to see whether it suited their needs, and said "It's excellent, nothing has happened yet to put me off and I hope I can stay". People told us staff always consulted them about their individual needs and involved them in decisions about their care and treatment. All the people we spoke with said they received the help they needed. Comments included "It's great"; "I'm very pleased with it"; "The care is very good".

People said they could do as they pleased and that there were no restrictions.

They also told us that they really appreciated having their own flat but also having areas where they could mix with other tenants to have a meal or join in with activities and trips out, which stopped them feeling lonely.

We asked people if they would know how to raise a concern about something that was worrying them. They expressed confidence that if they had a problem they would be able to discuss it with the registered manager and that it would be taken seriously.

People were also very complimentary about the staff and said that their needs were able to be met by the number of staff available. Comments included "The staff are lovely"; "The staff are very good"; "The staff are very friendly and encourage you to join in"; "If you pull the cord for help, someone comes straightaway, even at night".

### What we found about the standards we reviewed and how well Callin Court was meeting them

**Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run**

People are encouraged to express their views and make decisions about their care and support. Peoples' privacy, dignity and independence are respected.

**Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights**

People experience effective, safe and appropriate care, treatment and support that meets their needs.

**Outcome 07: People should be protected from abuse and staff should respect their human rights**

People are protected from abuse or the risk of abuse.

**Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs**

The service provides enough staff to meet people's needs.

**Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care**

There are systems in place to monitor the quality of service provided.

**Other information**

Please see previous reports for more information about previous reviews.

**What we found  
for each essential standard of quality  
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

**Compliant** means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

## Outcome 01: Respecting and involving people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

- \* Understand the care, treatment and support choices available to them.
- \* Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- \* Have their privacy, dignity and independence respected.
- \* Have their views and experiences taken into account in the way the service is provided and delivered.

### What we found

#### Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

#### Our findings

##### What people who use the service experienced and told us

We spoke with five people who were receiving a service. All said they had been asked what their needs were before they moved into Callin Court and the manager had discussed with them the care the service could provide. One person told us that they were staying at Callin Court on a trial basis for two weeks to see whether it suited their needs, and said "It's excellent, nothing has happened yet to put me off and I hope I can stay".

People told us staff always consulted them about their individual needs and involved them in decisions about their care and treatment.

People said they could do as they pleased and that there were no restrictions.

They also told us that they really appreciated having their own flat but also having areas where they could mix with other tenants to have a meal or join in with activities and trips out, which stopped them feeling lonely.

##### Other evidence

The manager said that people were given an information pack about the service when they made an enquiry. They could also visit for half a day to meet the other tenants and find out what the service could offer.

We saw from the care records that there was assessment of people coming into the service and this was done in consultation with the individual, their relatives and care

professionals. Each person had a personalised care plan which was reviewed regularly.

It was clear from reading the care plans and observing staff's interactions with people that staff were familiar with people's needs and knew what their preferences were.

A life history had been completed for each person who wished to provide the information, which included what people's hobbies and interests were. The manager told us that the activity co-ordinator also asked people what their interests were and devised activities to enable people to participate in activities they were interested in. Activities were arranged Monday to Friday. The activities programme for the week included music, crosswords, gardening, bridge, bible study, board games, knitting, scrabble and reminiscence. A visit from the pupils of Kings School had been arranged for Friday afternoon.

The manager held tenants' meetings on a regular basis. At the time of the visit the communal areas of the apartment block were being decorated and the manager said tenants had been involved in choosing the décor and pictures.

### **Our judgement**

People are encouraged to express their views and make decisions about their care and support. Peoples' privacy, dignity and independence are respected.

## Outcome 04: Care and welfare of people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

### What we found

#### Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

#### Our findings

##### What people who use the service experienced and told us

All the people we spoke with said they received the help they needed. Comments included "It's great"; "I'm very pleased with it"; "The care is very good".

##### Other evidence

During our visit we saw evidence of the assessment process and details of planned care in the records. We found the plans were sufficiently detailed to make sure people received an individual service and that they were signed by the individual to say they agreed with the plan of care.

Care records we saw showed that the focus was on the personal and individual needs of the person using the service. Care plans were individualised and covered particular areas such as mobility, hygiene and medication to make sure people's specific needs were met. Risk assessments were completed for any identified risks, such as falls, and actions identified to reduce the risks. People were also consulted about their wishes for the end of life and this was also documented and signed by the individual.

The manager and one of the senior care staff we spoke with confirmed they had received training in the Mental Capacity Act. We saw that, where necessary, care plans took into account capacity assessments and best interest decisions.

##### Our judgement

People experience effective, safe and appropriate care, treatment and support that meets their needs.

## Outcome 07: Safeguarding people who use services from abuse

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

### What we found

#### Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

#### Our findings

##### What people who use the service experienced and told us

People we spoke with told us that they felt safe and well cared for. We asked them if they would know how to raise a concern about something that was worrying them. They expressed confidence that if they had a problem they would be able to discuss it with the registered manager and that it would be taken seriously.

##### Other evidence

There were clear policies and procedures in place to safeguard people who use services, which included referral to the local authority safeguarding team.

Staff confirmed they were provided with safeguarding adults training to make sure they understood how to keep people safe. Staff were able to tell us the different types of abuse and the correct procedures to be followed if they witnessed or suspected any abuse of a person using the service.

##### Our judgement

People are protected from abuse or the risk of abuse.

## Outcome 13: Staffing

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

### What we found

#### Our judgement

The provider is compliant with Outcome 13: Staffing

#### Our findings

##### What people who use the service experienced and told us

People we spoke with were very complimentary about the staff and said that their needs were able to be met by the number of staff available. Comments included "The staff are lovely"; "The staff are very good"; "The staff are very friendly and encourage you to join in"; "If you pull the cord for help, someone comes straightaway, even at night".

##### Other evidence

We saw from the rotas that, as well as the Registered Manager, there were three care staff in total on duty during the day from 6:45am to 7pm, which included one senior carer and two care assistants. At night from 7pm to 6:45am there were two care assistants.

People who use the service had their dependency assessed by the manager and social services and people were allocated a set number of hours care per day according to their needs. The manager said she tried to ensure an even spread of dependency and she could bring in extra staff if necessary.

The service also employed an activity organiser and a chaplain.

##### Our judgement

The service provides enough staff to meet people's needs.

## Outcome 16: Assessing and monitoring the quality of service provision

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

### What we found

#### Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

#### Our findings

##### What people who use the service experienced and told us

We did not discuss this outcome with people using the service.

##### Other evidence

We saw that annual quality assurance surveys were carried out for staff and people who use the service. These were carried out by an external organisation. The survey outcomes were reviewed by the manager and compared to the previous year to see if any improvements or changes needed to be implemented. A survey carried out the previous month had shown a 98% satisfaction rate for people using the service and a staff survey done last year had shown an 83% satisfaction rate for staff employed by the service.

In addition the provider carried out their own Standards and Values Assessment every year, which looked at such things as person centred care, social involvement, medication, record keeping, staffing, training and management. Overall the service had scored 93%.

We saw that risk assessments were undertaken for people using the service with any necessary actions being taken and their effectiveness monitored with further changes being made if necessary. All risk assessments were regularly reviewed.

In addition, we saw that the manager audited care plans, medication and activities monthly and carried out a health and safety audit quarterly.

##### Our judgement

There are systems in place to monitor the quality of service provided.

# What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

**Improvement actions:** These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

**Compliance actions:** These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action:** These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

## Information for the reader

<b>Document purpose</b>	Review of compliance report
<b>Author</b>	Care Quality Commission
<b>Audience</b>	The general public
<b>Further copies from</b>	03000 616161 / <a href="http://www.cqc.org.uk">www.cqc.org.uk</a>
<b>Copyright</b>	Copyright © (2010) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

## Care Quality Commission

<b>Website</b>	<a href="http://www.cqc.org.uk">www.cqc.org.uk</a>
<b>Telephone</b>	03000 616161
<b>Email address</b>	<a href="mailto:enquiries@cqc.org.uk">enquiries@cqc.org.uk</a>
<b>Postal address</b>	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA