# Review of compliance

## Methodist Homes
### Moor Allerton Care Centre

<table>
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<th>Region:</th>
<th>Yorkshire &amp; Humberside</th>
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| Location address: | 4 Cranmer Close  
 Leeds  
 West Yorkshire  
 LS17 5PU |
| Type of service: | Domiciliary care service  
 Extra Care housing services  
 Rehabilitation services |
| Date of Publication: | November 2012 |
| Overview of the service: | Moor Allerton Care Centre provides support with personal care to people living in the housing complex. There are two sets of flats, Yew Tree Court and Rosewood Court. |
Our current overall judgement

Moor Allerton Care Centre was meeting all the essential standards of quality and safety inspected.

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 to check whether Moor Allerton Care Centre had taken action in relation to:

- Outcome 01 - Respecting and involving people who use services
- Outcome 04 - Care and welfare of people who use services
- Outcome 07 - Safeguarding people who use services from abuse
- Outcome 13 - Staffing
- Outcome 17 - Complaints

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 7 September 2012, checked the provider’s records, 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 nine people who told us they were satisfied with the care and support they received. They made the following comments:

"Its brilliant here and I do as I please. The staff are always checking that everything is ok and make sure I've got what I need."

"The staff say what the options are but don't ever press you into anything."

"My social life has never been as good."

"You can't beat it. I would never want to be anywhere else."

"It works so well. I can still close my front door and staff are at hand when I need them."

"They ask you about entering accommodation. With me they knock and wait for me to answer the door."
"Staff are very friendly, polite and very caring."

"We are well looked after. They do what they can to make sure they get it right."

"I'm very happy here. The staff are nice, the residents are nice and I was made very welcome. My experience here has been very good."

"My family know the staff and are very reassured. It's been the best thing for me."

"They answer all calls quickly through the intercom and if you want assistance then they will come straightaway."

"Sometimes they're busy but not too busy."

"If anything goes wrong they come and see you and soon sort it out."

"The staff take time and will listen if you want to talk."

"The manager sets up a surgery and tells us to call in if we want to discuss anything."

"At my review they checked if anything had changed and if I was happy with everything."

We spoke with five staff and the assistant manager and they all said people received good care and their needs were appropriately met. They told us people's rights were respected and good systems were in place to make sure people's privacy, dignity, and independence were promoted.

**What we found about the standards we reviewed and how well Moor Allerton Care Centre 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**

The provider was meeting this standard. People's privacy, dignity and independence were respected. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

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

The provider was meeting this standard. People experienced care and support that met their needs and protected their rights.

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

The provider was meeting this standard. People who used the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.
Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

The provider was meeting this standard. There were enough qualified, skilled and experienced staff to meet people's needs.

Outcome 17: People should have their complaints listened to and acted on properly

The provider was meeting this standard. There was an effective complaint's system available. Comments and complaints people made were responded to appropriately.

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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

A moderate impact means that people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

A major impact means that people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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 understood the care and support choices available to them. One person said, "It's brilliant here and I do as I please. The staff are always checking that everything is ok and make sure I've got what I need." Another person said, "The staff say what the options are but don't ever press you into anything."

People expressed their views and were involved in making decisions about their care and support. We spoke to some people about the tenant's meetings which people attended. They said these provided everyone with opportunities to make decisions and find out what was happening.

People were supported in promoting their independence and community involvement. People told us they regularly accessed the local and wider community, and had events where the local community were invited to visit the service. One person said, "My social life has never been as good." Another person said, "You can't beat it. I would never want to be anywhere else." People could engage in a range of activities. Several people said the activity programme was varied and well organised.

People who used the service had their own flat within Moore Allerton Care Centre and received staff support which was relevant to their needs and wishes. People who used
the service told us this enabled them to maintain their independence. One person said, "It works so well. I can still close my front door and staff are at hand when I need them."

People we spoke with were complimentary about the staff team and said they were treated with respect. Everyone we spoke with said their privacy and dignity was respected at all times. One person said, "They ask you about entering accommodation. With me they knock and wait for me to answer the door." Another person said, "Staff are very friendly, polite and very caring."

**Other evidence**

Staff said they had received training that helped them understand how to provide good care. The assistant manager said induction training covered key areas which included privacy, dignity, promoting independence and choice.

Staff told us people's rights were respected, and care and support was person centred. They said good systems were in place to make sure people's privacy, dignity, and independence were promoted, and gave examples of how they did this.

People who used the service were given appropriate information about their care and support. A 'guide to your service' was available and contained information about what people could expect and the services offered at Moor Allerton Care Centre. A range of information was displayed in the entrance and on notice boards. We spoke with one relative who said they were contacted when it was appropriate and overall communication with the service was good.

The assistant manager said people's needs were fully assessed by other agencies and the management team before they received a service. Things that were important to them in relation to their care were established and the support to meet these needs was then provided.

Care records showed that people's experiences were taken into account when planning care and support. Staff regularly assessed and analysed care records to make sure care delivery was appropriate and things that were important to people were established and reviewed.

**Our judgement**

The provider was meeting this standard. People's privacy, dignity and independence were respected. People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.
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

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<td><strong>What people who use the service experienced and told us</strong></td>
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<td>People we spoke with said they were satisfied with the care and support they had received. One person said, &quot;We are well looked after. They do what they can to make sure they get it right.&quot; Another person said, &quot;I'm very happy here. The staff are nice, the residents are nice and I was made very welcome. My experience here has been very good.&quot; Another person said, &quot;My family know the staff and are very reassured. It's been the best thing for me.&quot;</td>
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| **Other evidence** |
| Staff told us people received good care and their needs were appropriately met. They said people received support which was planned to make sure it met their individual circumstances, and effective systems were in place to make sure other agencies and professionals were involved when appropriate. They said every person had a clear plan which was regularly assessed. Staff said they had received training to understand how to meet people's specialist needs. |

Staff we spoke with had a clear understanding of their roles and responsibilities within the team, and were knowledgeable about the service.

At the last inspection we found that some care records did not identify how people's needs should be met. The assistant manager and a senior team leader discussed the new care planning system that had been introduced since the last inspection. Both had received relevant training and said care planning and assessment was more effective.
At this inspection we found that people's needs were assessed and care and support was planned and delivered in line with their individual care plan. Care and support was planned and delivered in a way that ensured people's safety and welfare. Care plans and assessments identified when people needed support from staff and what people could do on their own.

The registered manager and assistant manager had reviewed a number of care records each month and highlighted gaps. For example, they had identified that daily records did not contain enough information and should be clearer. The assistant manager said the audits were picking up any shortfalls.

Although we found that care records contained good information about how care and support should be delivered we noted that some detail differed in some of the documentation. For example, one person's daily record stated that they wore an alarm pendant but this was not recorded in their care plan. The assistant manager said they were still in the process of transferring some documentation to the new format and hoped to have this completed shortly.

Our judgement
The provider was meeting this standard. People experienced care and support that met their needs and protected their rights.
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

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Our findings

**What people who use the service experienced and told us**
People who used the service that we spoke with said they felt safe and did not have any concerns about the service or the staff.

**Other evidence**
The assistant manager told us at the time of our inspection that there were no safeguarding referrals being investigated by the local authority safeguarding team. Safeguarding matters were reported to the relevant safeguarding authorities and to us, and safeguarding procedures were followed when investigations were carried out.

Staff we spoke with said they were confident that people who used the service were protected from abuse. They said staff treated people well and any untoward practices would not be tolerated and would be dealt with promptly. Staff said they would report any concerns or allegations of abuse to the management team and were confident that any issues would be dealt with appropriately.

Staff we spoke with said they had received safeguarding training which provided them with enough information to know and understand the safeguarding processes that were relevant to them. The assistant manager confirmed staff who worked at the service received safeguarding of vulnerable adults and Mental Capacity Act training.

**Our judgement**
The provider was meeting this standard. People who used the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the
possibility of abuse and prevent abuse from happening.
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 who used the service told us there were enough staff working at the service and they had the right skills and experience. People said they received support at appropriate times. One person said, "They answer all calls quickly through the intercom and if you want assistance then they will come straight away." Another person said, "Sometimes they're busy but not too busy."

Other evidence
All of the staff we spoke with told us there were enough staff with the right skills and experience to meet people's needs. They said staff knew the needs of the people who used the service so they received a consistency of care, and they had sufficient time to support people properly.

Staff said people who used the service received the appropriate level of support to meet their individual needs. Some people required assistance from two staff throughout the day whereas other people only required minimal support from staff. One member of staff said, "The service is so flexible and that's what makes it work well. If someone only needs us to pop in and check they have had their medication we can do that but if someone needs a lot of help we can do that as well." Another member of staff said, "The staffing is fine. We have time to do everything we need to do and don't have to rush around all the time." Another member of staff said, "Residents are well looked after. Staffing is better than it was and now there are no problems."

The assistant manager told us that in April, the staffing levels had increased, which had
improved the routines for people who used the service, and systems were in place to respond to changing circumstances in the service, for example sickness, annual leave and staff training. The rotas showed the staffing levels discussed were maintained.

Our judgement
The provider was meeting this standard. There were enough qualified, skilled and experienced staff to meet people's needs.
Outcome 17: Complaints

What the outcome says
This is what people should expect.

People who use services or others acting on their behalf:
* Are sure that their comments and complaints are listened to and acted on effectively.
* Know that they will not be discriminated against for making a complaint.

What we found

Our judgement
The provider is compliant with Outcome 17: Complaints

Our findings

What people who use the service experienced and told us
People we spoke with said they could talk to staff or a member of the management team if they had any concerns and were confident that they would listen and deal with their concern appropriately. One person who used the service said, "If anything goes wrong they come and see you and soon sort it out." Another person said, "The staff take time and will listen if you want to talk."

People were made aware that they could raise concerns in various ways. Some people talked about tenant's meetings and said the manager held surgeries where they could discuss any issues. One person who used the service said, "The manager sets up a surgery and tells us to call in if we want to discuss anything." Another person said, "At my review they checked if anything had changed and if I was happy with everything." We noted future tenant's meetings and surgeries were advertised on the notice board.

Other evidence
Staff we spoke with said people who used the service were encouraged to discuss any concerns. Staff said good systems were in place to make sure people were listened to, and they were confident the registered manager and other members of the management team would deal with any concerns or comments promptly and take appropriate action where necessary.

We asked for and received a summary of complaints people had made and the provider's response. People's complaints were fully investigated and resolved where possible to their satisfaction. The complaint's record showed that there had been no
People were made aware of the complaint's procedure. The complaint's procedure was available in the service and had clear steps that people could follow if they were unhappy about the way they were treated. People were given 'a guide to your service' which told them how they could make a complaint.

Our judgement
The provider was meeting this standard. There was an effective complaint's system available. Comments and complaints people made were responded to appropriately.
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.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

**Compliance actions**: These are actions a provider must take so that they achieve compliance with the essential standards. 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

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<th>Document purpose</th>
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<tr>
<td>Author</td>
<td>Care Quality Commission</td>
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                           | NE1 4PA |