

We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

Fulwood Court

529 Aigburth Road, Liverpool, L19 9DN

Date of Inspection: 23 January 2014

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We inspected the following standards as part of a routine inspection. This is what we found:

Respecting and involving people who use services	✓ Met this standard
Care and welfare of people who use services	✓ Met this standard
Safeguarding people who use services from abuse	✓ Met this standard
Supporting workers	✓ Met this standard
Assessing and monitoring the quality of service provision	✓ Met this standard

Details about this location

Registered Provider	Methodist Homes
Registered Manager	Ms. Ester Markey
Overview of the service	<p>Fulwood Court is a complex providing people with their own one or two bedroom apartment with care staff available twenty four hours a day for general support. In addition the complex provides a bistro, hairdressing salon and activities. If needed people can have a care package from Fulwood Court to support them with their personal care. It is this part of the service that is registered with the Care Quality Commission to carry out the regulated activity 'personal care'.</p>
Type of service	Domiciliary care service
Regulated activity	Personal care

Contents

When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.

	Page
Summary of this inspection:	
Why we carried out this inspection	4
How we carried out this inspection	4
What people told us and what we found	4
More information about the provider	4
Our judgements for each standard inspected:	
Respecting and involving people who use services	6
Care and welfare of people who use services	7
Safeguarding people who use services from abuse	8
Supporting workers	9
Assessing and monitoring the quality of service provision	10
About CQC Inspections	11
How we define our judgements	12
Glossary of terms we use in this report	14
Contact us	16

Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 23 January 2014, observed how people were being cared for and talked with people who use the service. We talked with carers and / or family members, talked with staff and reviewed information given to us by the provider.

What people told us and what we found

During the inspection we spoke with many people who used the service. They spoke positively about the support they received to make decisions about their care and in general. They said "The staff are very friendly, always helpful, they help me when I need them and leave me alone when I don't."

We found that people's need were assessed and care and treatment was planned and delivered in line with their individual care plan. One person said "Staff are very friendly they always respond quickly when we need help, I feel safer knowing they are nearby and I know that when needs change I can increase the care package I already have."

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. People received care, treatment and support from staff that were competent to carry out their roles and responsibilities.

We looked at the systems in place to see how the quality of service was monitored. We found that good processes were in place, people and their relatives were asked for their views about their care and treatment and these were acted on. There was evidence that learning from incidents had taken place and appropriate actions had been taken.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Respecting and involving people who use services ✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People's privacy, dignity and independence were respected.

Reasons for our judgement

During the inspection we spoke with many people who used the service. They spoke positively about the support they received to make decisions about their care and support. They said "The staff are very friendly, always helpful, they help me when I need them and leave me alone when I don't."

At Fulwood Court, people have the privacy and dignity of their own apartment which is decorated and furnished by themselves. The complex has a lounge and bistro restaurant area and people can choose to use these areas or not. On the day of our visit we observed people eating together in the bistro restaurant and using the lounge area for recreation purposes. We found that people living here had a choice of daily activities and on the day of our visit this included a film night for all people to attend .

We observed that people were relaxed about having informal discussions with staff and the home manager. We found that on an annual basis people's views were asked as part of a periodic survey. The last survey had been carried out by an external company and this involved face to face discussions about the service and how this could be improved. We saw that action plans had been developed for any improvements identified and these were monitored and discussed at regular meetings with people who used the service.

We spoke with a number of staff about the care and support they gave to people. They explained that where possible people were encouraged and supported to care for themselves. They were respectful of the choices and decisions made by people and their families. We observed staff supporting those who were more dependent. We saw staff taking time to listen and helping people make the right choices in terms of their care and support.

People should get safe and appropriate care that meets their needs and supports their rights

Our judgement

The provider was meeting this standard.

Care and support was planned and delivered in a way that was intended to ensure people's safety and welfare.

Reasons for our judgement

We found that people's needs were assessed and care and support was planned and delivered in line with their individual care plan.

During the inspection we spent time talking with people who used the service. We asked them and their families about their experience of the care and support at Fulwood Court. Everyone spoke highly of the care they received.

One person said "The staff are lovely, I knew I had made the right decision to come here as soon as I walked through the door." Another person said, "Staff are very friendly they always respond quickly when we need help, I feel safer knowing they are nearby and I know that when needs change I can increase the care package I already have."

We looked at the care files for four people who used the service. They were individualised and included a personal profile, life story and a number of risk assessments. These included falls, medication and nutritional risk assessments amongst others. Each care file had detailed care plans with good guidance for staff about how to support people. Robust monitoring arrangements were in place and we found all records completed with sufficient detail. We found that care plans were reviewed each month by staff and updated to reflect any changes to a person's health and needs. Individual records were made of consultations with, or visits from, health and social care professionals.

People should be protected from abuse and staff should respect their human rights

Our judgement

The provider was meeting this standard.

People who use 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.

Reasons for our judgement

We found that 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. All of the people we spoke with were aware how to raise concerns of abuse and policies and procedures were in place for protecting vulnerable adults. We spoke with staff and they were clear about the aspects of the safeguarding processes that were relevant to them. They understood the signs of abuse and were confident to raise any concerns with the right person if they noticed any signs.

We looked at the systems the manager had in place to monitor and review incidents and complaints that had the potential to become a safeguarding concern. These were reviewed by the home manager and if required action was taken swiftly. We found that training records were kept and they demonstrated that all staff had received safeguarding and mental capacity training. Staff we spoke with showed they understood the key issues related to this.

Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Our judgement

The provider was meeting this standard.

People were cared for by staff who were supported to deliver care safely and to an appropriate standard.

Reasons for our judgement

People received care and support from staff that were competent to carry out their roles and responsibilities. We found the provider had a system in place to ensure all staff received a comprehensive induction. This included an induction to the organisation and to the aims and objectives of the service. We were told that new staff members went through a period of working under supervision with a mentor supporting their development. Competency based assessments were also undertaken prior to the new team member working without supervision.

We spoke with the manager to confirm that the learning and development needs identified for staff were based on the needs of people who used the service. All staff had an individual staff file. This included information relating to their learning and development plan and the training they had attended. We found that appropriate financial resources were available to support staff training and development and robust monitoring processes were in place to ensure staff attended relevant courses.

Training records verified what training had taken place and what training was planned. This included mandatory and accredited training outside of the organisation. Staff told us they were well supported and they were clear about their lines of accountability. The organisation had arrangements in place for ensuring all staff had to complete an annual appraisal. All staff told us this was a positive experience and one which they welcomed. We spoke with staff about supervision, and found that supervision was undertaken monthly for all staff with their line manager and records were made to this to further support staff development.

Assessing and monitoring the quality of service provision

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

The provider had an effective system to regularly assess and monitor the quality of service that people received.

Reasons for our judgement

We looked at the systems in place to see how the quality of service was monitored. We found that good processes were in place, people and their relatives were asked for their views about their care and support and these were acted on. There was evidence that learning from incidents had taken place and appropriate actions had been taken.

The service undertakes an annual 'resident's survey' and had recently introduced a new independent system for obtaining relative's views. People were invited to attend a consultation meeting, involving them in small groups as well as individually. A card game was used to stimulate discussion about people's views for how the service was run, their care and the home environment. Views of people who used the service were also obtained formally and informally through contact with the manager and with comments and suggestions posters and boxes. All information was analysed and the results were fed back to people at regular 'resident's meetings'. Records showed how staff were encouraging and enabling people to be involved in how the service was run and how it could be improved.

We saw that regular audits were undertaken including medication and record keeping. This included in house checks and monitoring from other parts of the organisation. Robust arrangements were in place with annual two day inspections carried out by the provider to monitor quality and safety. Feedback from people who used the service was an important feature of this process. We found that systems were in place for the reporting of incidents and all staff were aware of these.

The home had a complaints process in place and we found that all complaints made had been acted on swiftly by the manager.

We spoke with staff who confirmed they were confident that if they needed to raise concerns, they would be treated confidentially.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social 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 essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

Minor impact - 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.

Moderate impact - 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.

Major impact - 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

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

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