

Forum Court Limited

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Inspection report

80 Lord Street
Southport
Merseyside
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Tel: 01704533882

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19 September 2016

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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

We carried out this inspection of Forum Court on 19 September 2016. This was an announced inspection. We gave the provider 48 hours' notice that we would be coming as the service provided domiciliary care, and we wanted to be sure someone would be available.

Forum Court is an extra care housing complex consisting of 59 privately owned apartments in the centre of Southport. Forum Court is a not for profit organisation that is run by an elected board of directors who also live within Forum Court. The Care Quality Commission regulates the personal care service directly provided by Forum Court for a small number of people who live there. Limited car parking is available to the rear of the building and there are gardens at the front of the building. At the time of our inspection there was one person receiving a domiciliary care service totalling three hours per week.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The person told us they felt safe and liked the staff. Staff we spoke to had a good knowledge of safeguarding and how to recognise signs of abuse. The provider had procedures in place which would help keep people who used the service safe from harm. We could see these procedures were discussed as part of the staff's induction process.

The provider had risk assessments and care plan in place for the person. This contained all relevant information about the needs of the person.

There was a procedure in place should the staff be required to administer medications, however the person in receipt of care at the time did not require this service.

The person told us there were enough suitably trained staff to meet their individual care needs. Staff were only appointed after a thorough recruitment process. The person told us the staff always conducted the visits when they were expected to do so.

The person's privacy and dignity was upheld. For example, staff would knock on their door and wait to be asked in.

Staff monitored the person's health and welfare needs by documenting when the person had an appointment, this was discussed with the person with their permission.

The registered manager and staff we spoke with were aware of their roles in relation to the Mental Capacity Act 2005 and associated legislation.

Staff were trained and skilled in all subjects relating to their job roles, such as safeguarding, first aid and manual handling. Some staff were booked on to do refresher training.

Staff said they benefited from regular one to one supervision and appraisal from their manager.

Quality assurance audits were carried out and for people who used the services of the agency their verbal feedback was sought or they completed satisfaction surveys. .

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.

The person told us they felt safe.

Staff were recruited and selected in accordance with the provider's recruitment policy. All checks had been carried out to ensure staff were fit to work with vulnerable adults.

There was enough staff to meet the person's needs.

Is the service effective?

Good ●

The service was effective.

Staff received training and support to care for people in accordance with their individual needs.

The person told us the communal areas in Forum Court were well maintained, were comfortable, and accessible.

Is the service caring?

Good ●

The service was caring.

The person spent time telling us how they liked the staff at Forum Court and liked the staff coming in to support them.

The person was involved in their support plan and was able to talk us through it.

There was advocacy information available for people to refer to should they require this support.

Is the service responsive?

Good ●

The service was responsive.

There was a complaints procedure in place and the service had not received any complaints.

Staff were able to demonstrate a good knowledge of the person they supported, such as their likes and dislikes

Is the service well-led?

Good ●

The service was well-led.

The registered manager led by example and staff and the person who used the service spoke highly of the registered manager.

Staff knew what was expected of them, and told us they would not hesitate to whistle blow should they need too.

Effective processes in place for routinely monitoring the quality of the service to ensure it was well managed.

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Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 19 September 2016 and was announced.

The provider was given 48 hours' notice because the location provides a domiciliary care service we needed to be sure that staff would be available to speak with us, and the registered manager or someone in charge would be in.

The inspection team consisted of an adult social care inspector.

Before our inspection we reviewed the information we held about the home. This included the Provider Information Return (PIR). A PIR is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also looked at the statutory notifications and other intelligence which the Care Quality Commission had received about the home.

During the inspection, we spent time with three staff who worked at the service, including the registered manager. We spoke with the person who used the service at length and spent some time with them in their flat.

We looked at the care records for the person using the service, three staff personnel files and records relevant to the quality monitoring of the service.



Our findings

We spent time with the person using the service and they told us they felt safe. They said "The staff are wonderful, they always come and help me. I have gotten to know them all."

The person receiving care at the time our inspection did not have any medication needs. They told us "I can handle all of my own medication." We asked the registered manager about the process in relation to medication. The registered manager showed us examples of medicine training which had been completed by staff ensuring that if someone required the staff to support them with this task they would be able to.

All of the staff told us they thought they provided good care and support to the people they provided a service too and they would report any bad practice or mistreatment.

There was a safeguarding policy in place. Staff we spoke with were aware of the policy and described to us what action they would take if they felt someone was being abused.

We looked at four staff personnel records including a staff file for newly appointed member of staff. We saw had the appropriate evidence of safe recruitment, this included qualifications, references and appropriate checks such as Disclosure and Barring Scheme (DBS) records which had been checked.

To ensure the safety of people using the service and staff risk assessments were in place. We saw these included the person's mobility, environment, moving and handling, health and safety, and use of equipment.

We spot checked a number of safety certificates for the communal areas of the housing complex, such as gas, electric and PAT (portable appliance testing) and found they were in date. We saw that checks had been completed in each area within the previous 12 months. The home had a general evacuation plan in place and tests on emergency equipment were conducted and recorded regularly.

Accidents and incidents were recorded in appropriate detail and assessed by the registered manager. The registered manager was required to submit information electronically to the provider. The information was then analysed by a specialist team to identify patterns and triggers to help minimise the risk of re-occurrence.

We observed there was enough staff on duty to provide a consistent level of support for the person using the

service. The person confirmed they knew all of the staff and there was never a problem in relation to staffing. Staffing rotas we viewed looked well managed.



Our findings

Staff were given regular formal supervision which was recorded on their file. The staff we spoke with confirmed that supervision took place every few weeks and staff had an annual appraisal.

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 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 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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

The manager explained the process they would follow if an application was required to safeguard someone in accordance with the principles of the MCA.

We checked to see how the service gained consent from people regarding their care and support. We saw this was recorded within the plan of care. For example, consent for records to be shared and consent for staff to enter the person's home and provide the care. .

Training was provided for staff using a mixture of e learning and classroom based courses. We saw from looking at the training matrix and staff's training certificates that all staff had been trained, and refresher training had been scheduled for staff who required it. We asked the staff if they felt the training helped them within their roles. One staff member said, "Yes, its ok, I might be due more around now."

We asked about the induction of staff. Staff were inducted according to the 'The Care Certificate'. The Care Certificate is an identified set of standards which health and social care workers must adhere to in relation to their job role. Staff told us they completed a week of 'shadowing' with a more experienced member of staff who introduced them to the people they would be caring for.

Staff supported people with medical appointments should this be needed and recorded appointments for people who had attended the appointments on their own. There was a log which could be used by the person to remind them of appointment's were due.

The person showed us their flat, which included a fully fitted kitchen. The person made their own food and drink independently. We saw there was a restaurant within Forum Court and the person could choose to purchase meals and eat with other people at the scheme if they wished.



Our findings

We received positive comments regarding the caring nature of the staff. Some of the comments included "They [staff] are wonderful." In addition "It makes such difference, they are like friends."

We saw that staff involved the person in conversations and decisions about their own care. Throughout the inspection the registered manager and staff spoke in a manner which was gentle and respectful about the person and while they were in their home.

We saw that the person had choice and control over their life and that staff responded to them expressing choice in a positive and supportive manner. The person said "I just go out when I want, there is always staff around."

Staff spoke with respect about the person and told us how they promoted their dignity in practical ways. A member of staff said, "When we give personal care we shut windows and doors to give dignity and privacy." Another member of staff said, "I always knock and wait to be asked in."

The person showed us their care plan, which had been signed by them, and confirmed it undergoes regular reviews and they are part of that review process.

We saw on the notice board in the communal area there was information regarding local advocacy and the person confirmed they knew where this notice board was and they would access it if they felt they needed too.



Our findings

We saw that the care plan was basic, however it was written in way in which the person had chosen. The person told us "They all know me so well, and I can just tell them what I want." There was some information in the care plan regarding the person's medical conditions and some background information.

The person told us their care was completed by a female member of staff as this was their preference.

We saw that there was a complaints policy in place, and the person we spoke with told us they would not hesitate to complain if they felt something was wrong. The complaints policy was also displayed in the communal areas of Forum Court.

We asked the registered manager if there had been any complaints in the last 12 months, however there was no complaints documented. The registered manager told us that because people were always around if, there were any problems, they tended to get dealt with straight away.

There was also regular 'tenant meetings' and 'coffee mornings' in Forum Court, people could attend if they wished. We saw plenty of posters and timetables advertising different events, which were taking place in Forum Court and these were made known to people..



Our findings

There was a registered manager in post who had been in post for a number of years.

The person told us they liked the registered manager and had a good relationship with them. The person said "Oh yes [registered managers name] is wonderful. Staff also told us they liked the registered manager and felt they were a good source of support. Most of the staff had been in post for a number of years and felt the organisation was good to work for. When we asked staff if they would recommend the organisation, they all said they would.

Team meetings were regular and were well organised on rotas so staff would be available to attend. The last team meeting was in August 2016. We were able to view the minutes of these.

Monthly audits took place to assess the quality of the care delivered. Records confirmed that audits had been conducted in areas such as health and safety, including accident reporting, moving and handling, and risk assessments. Where actions were we saw evidence this was recorded and plans put in place to achieve any improvements required.

We asked about feedback. We saw that the registered manager had a regular face to face conversation with the person who used the service, which was appropriate for the size of the service being provided. The registered manager assured us that if the service grew larger questionnaires would be sent to people and feedback would be gathered that way instead, as that was how the service used to operate when there was more people using it.

The home had policies and guidance for staff to follow. For example, safeguarding, whistle blowing, compassion, dignity, independence, respect, equality and safety. Staff were aware of these policies and their roles within them. Staff told us they would not hesitate to whistle blow if they needed to.

The registered manager understood their responsibility and had sent all of the statutory notifications that were required to be submitted to us for any incidents or changes that affected the service.