

Anchor Hanover Group Wyken Court

Inspection report

87-91 Attothall Road
Wyken
Coventry
Warwickshire
CV2 5AL

Tel: 02476659529
Website: www.anchor.org.uk

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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

About the service: Wyken Court is an 'extra care' housing scheme. People live in their own homes where care and housing are provided under separate contractual agreements. CQC does not regulate the premises used for extra care housing. We only inspect the service being received by people provided with 'personal care'; help with tasks related to washing, dressing and eating.

Wyken Court provides personal care and support to people within a complex of 35 one-bedroom flats. The flats are arranged over three floors with a lift and stairs to each floor. Staff provide care at pre-arranged times and people have call bells to request assistance in an emergency. People have access to a communal lounge and a 'café' for breakfast and lunch.

Not everyone living at Wyken Court received personal care. At the time of our inspection visit 16 people were in receipt of personal care from the provider. People required varying levels of personal care and support depending on their needs. Some people required minimal assistance with personal care. Others required assistance with showering/bathing, mobility, continence care, administration of medication, and nutritional support

People's experience of using this service.

- People felt safe and were protected from avoidable harm.
- Staff knew about the risks associated with people's care and understood how to keep people safe.
- Staff supported people to take their medicines safely and understood how to prevent the spread of infection.
- People received care from a consistent team of staff who arrived when expected and stayed for the length of time agreed.
- People's needs were assessed to ensure they could be met by the service.
- Staff were recruited safely, and there were enough staff to meet people's assessed needs.
- Staff received on-going support and training to be effective in their roles.
- People made their own decisions about their care and were supported by staff who understood the principles of the Mental Capacity Act 2005.
- Where required, people were supported with their nutritional needs and to maintain their health and well-being.
- Staff respected people's rights to privacy and dignity and promoted their independence.
- People received information about the service in a way they could understand.
- People were involved in planning and agreeing their care.
- Care plans contained the information staff needed to provide personalised care.
- Systems were in place to manage and respond to any complaints or concerns raised.
- The provider had effective and responsive processes for assessing and monitoring the quality of the service.

At this inspection we found the service met the characteristics of a "Good" rating in all areas.

Rating at last inspection: At our last comprehensive inspection of this service in June 2016, we rated the service as 'Good'.

Why we inspected: This was a planned inspection based on the date and the rating of the previous inspection.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our inspection programme. If any concerning information is received 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.

Wyken Court

Detailed findings

Background to this 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: One inspector carried out the inspection over two days.

Service and service type: Wyken Court is an extra care housing scheme registered to provide personal care to people living in their own home. This includes, older people, people with mental health problems, and people living with dementia.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection: This comprehensive inspection took place on 12 and 13 March 2019. The inspection was announced. We gave the provider 24 hours' notice of the inspection so they could arrange for us to visit people who lived at Wyken Court.

We visited people who lived at Wyken Court on 12 March 2019 and visited the office location on 13 March 2019 to see the registered manager, speak with staff; and to review care records and policies and procedures.

What we did: Prior to the inspection, we looked at the information we held about the service and used this to help plan our inspection. This included information the provider must notify us about, such as allegations of abuse. We reviewed the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We also contacted the local authority commissioners for the service, they had no new information to share with us.

During our visits we spoke with nine people who lived at Wyken Court, and two relatives. We also spoke with

the registered manager, two deputy managers, a team leader, and three members of care staff.

We reviewed a range of records. That included, three people's care records, including risk assessments and medicine records. Three staff personnel files, including recruitment, induction and training records. Staff work programmes. Records of accidents, incidents and complaints. Management audits and checks.

Is the service safe?

Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse.

- People felt safe living at Wyken Court and with the staff that visited them. Comments from people included, "I feel safe and secure here." A staff member told us, "People are 100% safe here. They are looked after properly and we report changes straight away so people get the support they need."
- Care staff had completed training and knew how to recognise abuse and understood their responsibilities to report concerns to the managers. A staff member told us, "We have a poster in the staff room with information about who to contact for safeguarding including whistle blowing numbers if we have any concerns about other staff."
- The registered manager knew the procedure for reporting concerns to the local authority and to us (CQC). They shared information, when required to ensure any allegations or suspected abuse were investigated.

Assessing risk, safety monitoring and management.

- People had an assessment of their care needs completed at the start of the service. This identified any potential risks to providing their care and support.
- Staff knew about risks associated with people's care and had completed training to manage people's risks and keep them safe.
- Some people used equipment to help them move. A mobility care plan was completed so staff had the information they needed to move people safely.
- Some people required checks on their skin to make sure it remained in good condition. Care plans reminded staff to check people's skin when assisting with personal care and apply prescribed creams to prevent deterioration. Staff recorded marks or bruises on people's skin and reported them to team leaders who contacted health professionals if needed.

Staffing and recruitment

- There was a consistent staff team that provided care and support to people at pre-arranged times.
- There were sufficient staff to ensure people received all their care calls, at the times agreed. The registered manager told us, "We have the right staff in place. We do not use agency staff to cover staff absence as we have bank staff which provides continuity, and team leaders will step in to cover calls if needed."
- People told us staff arrived when they expected them, and stayed the time required to provide the care and support they needed.
- The provider's recruitment process included checks to ensure staff who worked for the service were of a suitable character. Staff recruitment files showed Disclosure and Barring Service (DBS) checks and references had been obtained before staff started work.

Using medicines safely.

- Where people were supported to take their medicines, this was recorded in their care plan.
- Staff had been trained to administer medicines and had competency assessments completed to make sure they understood how to manage medicines safely.
- Staff signed a medicine administration record (MAR) to confirm medicines had been given.
- Some people were prescribed medicine patches for pain relief. We found the application of one person's patches did not always follow the manufacturers guidelines. The registered manager advised a 'transdermal patch' recording system would be implemented to make sure people's medication patches remained safe and effective.

Preventing and controlling infection

- Staff understood their responsibilities in relation to infection control and hygiene. One staff told us, "We had infection control training during induction. We use disposable aprons and gloves for personal care, applying cream and doing household tasks".
- People confirmed staff washed their hands and wore disposable gloves and aprons when required.

Learning lessons when things go wrong.

- Staff understood the importance of reporting and recording accidents and incidents so planned care could be reviewed and people remained safe. For example, staff told us about one person who bruised easily. They said "We complete a body chart and complete an accident and incident form. We pass forms to the team leaders to read and log on the system".
- The managers and provider monitored accidents and incidents to prevent reoccurrence and to identify any learning.

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.

Good: 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.

- People's needs were assessed before they moved to Wyken Court. Assessments included people's care and support needs, likes and life style choices to ensure their needs could be met.
- Information from assessments was used to develop care plans which documented the support people required.
- Care plans were available in the office for staff to consult and a copy kept in people's homes for staff to follow during visits.
- People's needs were kept under review to make sure they continued to be met. A relative told us, "We had an assessment completed before [name] moved in and another assessment before he came out of hospital, after another stroke, to make sure they could still meet his needs."

Staff support: induction, training, skills and experience.

- People received effective support from a small team of trained staff who knew them well. One person told us, "Staff know what they are doing, and they have a lot of training to make sure they have the knowledge to care for us."
- Staff felt supported in their role; they received an induction when they first started to work at Wyken Court, which for staff new to care included the Care Certificate. The Care Certificate is the nationally recognised induction standard.
- Staff completed ongoing training, and received one to one meetings to support them with their work. Training courses included moving and handling, administering medication and food hygiene, as well as specific training to meet people's individual needs.
- Staff spoke positively about the training they completed. For example, "We have very in-depth training, you can ask questions and they make it really interesting."
- A staff member told us about their dementia care training, "I really liked the dementia training. It helped me understand about dementia as I had no experience of this and how dementia affects people."
- Staff training was kept under review and monitored regularly to make sure staff kept their skills up to date and completed refresher training in line with the providers timescales.

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

- Staff made sure people who required support with their nutritional needs had sufficient amounts to eat and drink.
- Staff made people meals and drinks of their choice and left them with a drink before leaving.
- People could choose to make their own meals or purchase a breakfast and lunch from the 'café' on the ground floor.

- Risks associated with people's eating and drinking were assessed. How to manage identified risks were recorded in care plans for staff to follow. At the time of this inspection no one required their food and drink intake monitoring.

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

- People told us staff would help to arrange health care appointments if they asked.
- Staff monitored people's wellbeing, such as their general health, and referred people to health care professionals if they identified any concerns.
- The management team and staff worked with health and social care professionals to improve outcomes for people. Such as district nurses, GPs and SALT (Speech and language therapists).

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

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 with appropriate legal authority.

We checked whether the service was working within the principles of the MCA.

- The registered manager understood their responsibilities under the Act and knew to contact the local authority if they had concerns about a person's capacity.
- Staff understood the principles of the MCA. One told us "I had training about this (MCA). All customers [people] have capacity to make decisions. If people's decision making changed we would inform team leaders who would report this to social services."
- People confirmed staff sought their consent before they provided support.
- Records demonstrated people's consent to care was sought and people's rights with regards to consent and making decisions were respected by staff.

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.

Good: 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.

- People spoke positively about their care and described staff as kind and friendly. Comments from people included, "I do love it here," and, "The staff are the nicest people you could wish to meet."
- Staff understood how to treat people well and this was reflected in their practice. For example, one person said, "Staff are alright, they treat me well." A relative told us, "[Name] seems really happy here, the atmosphere is lovely."
- People felt valued because staff took an interest in them. One person told us "They are very friendly, we have got to know each other. They know about my family and I know about theirs."
- Staff enjoyed their work. One told us, "I think it's a great place to work and live. We get good feedback from people living here. I would be happy for my nan or granddad to live here."
- Most people told us staff had time to talk with them and they did not feel rushed.
- People's individual life style choices and values were respected. One person told us "I do prefer female carers for showers, they respect my wishes and don't send a man to do this."
- Staff told us some people declined personal care. Staff said they would encourage people to wash and change their clothes but respected people's wishes and recorded when support was declined.
- The providers PIR told us 'Anchor (the provider) has an 'LGBT+ group' (Lesbian, Gay, Bisexual and Transgender) which is a support group for LGBT people using the service and supports the organisation to deliver inclusive services for LGBT people.

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

- People confirmed they were consulted and involved in their care. This included developing their care plans and regular review meetings about their care. One person told us, "I am involved in my care, we have reviews to make sure nothing has changed."

Respecting and promoting people's privacy, dignity and independence.

- Staff treated people with dignity and respected their privacy. Comments from people included. "They are very mindful of my privacy and dignity." Another said, "I am always treated with respect and my modesty is still in my grasp."
- People were supported to maintain their independence and to continue to do things for themselves. One person told us, "When I first came here I couldn't do much at all after a stroke. I can do most things myself now with a little staff support. They [staff] always encourage you to do things so you maintain your independence and control."
- Staff knew how to promote people's privacy and independence. One told us, "We only help with things people need. I will wait outside while people wash or use the bathroom and they can call me when they are

ready."

Is the service responsive?

Our findings

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

Good: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control.

- People's care and support was planned with them when they started using the service. Each person had a care plan in their home for staff to follow.
- Care plans were detailed and provided staff with information about how they should support people in a way that met their likes, needs and preferences.
- Staff had a good understanding of people's needs, likes and preferences. People told us, "Staff are lovely, they understand my needs and how I like things done."
- People received care visits at the time expected, by staff they knew and liked. Comments included, "Staff do change but I know them all." "Staff are considerate, we get on well," and "We laugh and joke all the time."
- Staff confirmed they visited people at consistent times. One said, "We have call cards with set times so we know who to visit. We always have time to read the care plan and everyone here is able to tell you what they want."
- Staff reported any changes or concerns about people's care to the team leaders or managers, so they could reassess people's needs.
- The management team regularly reviewed people's care. Where changes were needed information was shared with staff and people's care records updated.
- Staff told us communication worked well and they were kept up to date about people's needs. One said, "We have a communication book that we complete and can read to find out about people. We also have a handover when we come on shift so we are kept up to date about people."
- People had access to a call alarm system if they needed support in an emergency between planned visits. One person said, "I have a call alarm for safety. I ring the bell if I need anything, its answered though the intercom, and they come straight away."
- Information was available in different formats for people, such as large print or other languages if required. This was in line with the 'Accessible Information Standard' which is a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand the information they are given.

Improving care quality in response to complaints or concerns.

- Systems were in place to manage and respond to any complaints or concerns raised.
- People knew how to raise complaints and had been provided with complaints information.
- People said they had no cause to complain but were confident any issues they raised would be addressed. One told us, "If I had any complaints I would go straight to the office and speak with [manager]. But I have never had to."
- The managers regularly checked people were happy with the service they received so any concerns could

be dealt with quickly.

- No formal complaints had been received in the past 12 months.

End of life care and support

- The service provided support to people who chose to spend their final days in their own home.
- Where people had chosen to share their wishes in relation to end of life care this was recorded in their care plan.
- There was no one using the service at the time of our inspection who required end of life care.

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.

Good: 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 provider understood their responsibilities and the requirements of their registration. For example, the registered manager had submitted notifications as required and their latest CQC rating was displayed in the reception area. However, at the time of our office visit the latest report was not available on the providers website as required. We discussed this with the registered manager, who checked the website and took immediate action to contact the providers IT department to have this re-instated. Confirmation was received from the registered manager following the inspection visit that the latest report was now available on the provider's website.
- Staff understood their role, they enjoyed their work and felt supported by their managers. One said, "All the management team are really helpful and always available."
- People thought the service was well managed. One told us, "It's a well- managed service, it works well."
- The provider's quality assurance processes put people at the centre of their care and ensured they received a good quality service. The management team visited people regularly to discuss their care, observed staff practice in people's homes, sent questionnaires to people, and carried out regular audits of the service.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility.

- Wyken Court had an experienced management team who people and staff described as 'approachable, available and supportive'.
- The registered manager had responsibility for three of the providers extra care housing schemes. The deputy manager delegated in the registered manager's absence. There were systems and processes to keep all the management team informed about events at Wyken Court. For example, an electronic diary was used where all appointments were recorded including people's assessments, care reviews, staff supervision and staff training which provided a good overview of the day to day running of the service.
- Staff said there was good team work and they could share their views and opinions. One told us, "We have quarterly staff meetings and team leader meetings where we discuss changes and developments. I feel quite confident to challenge any new ideas I don't agree with, [registered manager] will listen."
- People were satisfied with the service they received. Comments from people included, "This is the best place I have lived in 30 years. In my opinion everything about it is outstanding."
- The provider and registered manager understood the need to be open and honest when things went wrong so lessons could be learnt.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics: Continuous learning and improving care

- Feedback from people and staff was encouraged through meetings, reviews of care and surveys.
- Feedback was used to support continuous improvement. People told us, "We have tenant's meetings where you can share your views, I do feel listened to."
- The management team held monthly meetings where they discussed any issues relating to people or staff and to identify if improvements were required.
- Staff said they felt valued and appreciated. One said, "I enjoy every working day in my role, I have learnt a lot since working at Wyken Court. The team leaders are the best anybody could ask for, they go above and beyond in their role."
- Staff had regular individual meetings and staff meetings which gave them the opportunity to discuss any issues of concern and share their views and suggestions.
- The provider had a staff recognition scheme called 'above and beyond' to acknowledge good staff practice.
- The managers and staff were very proud of being regional finalists for the 'Care Team Award' at the Great British Care Awards. Which is a nationally recognised award.
- The registered manager and provider shared a copy of their internal audit completed in March 2019 based on CQC key questions, which rated the service as 94.7%.

Working in partnership with others.

- The provider was committed to working in partnership with other organisations to improve outcomes for people.
- The management team had developed positive working relationships with health and social care professionals which assisted in promoting people's physical and mental health.