

Methodist Homes

Fulwood Court

Inspection report

529 Aigburth Road
Liverpool
L19 9DN

Tel: 01514325800

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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

Fulwood Court is an apartment complex made up of 33 owned or rented, one or two bedroom apartments. It has a bistro with kitchen and dining areas, a large communal lounge, hairdressing salon and activities.

If needed people can have a domiciliary care package from Fulwood Court to support them with their personal care. Not everyone living at Fulwood Court received personal care. The Care Quality Commission (CQC) only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. At the time of our inspection the service was providing personal care to 10 people.

People's experience of using this service and what we found

People told us they felt safe living at Fulwood Court. Comments included, "Oh yes I'm very safe" and "Yes I do feel safe, I get on well with the staff and I trust them."

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People's needs were effectively assessed before they were supported by the service and staff worked effectively with other healthcare professionals to ensure people's health and wellbeing was maintained.

All the people we spoke with gave us positive feedback about the staff at the service and we saw staff knew the people they supported well. People commented, "The staff are good, we have a laugh and a joke" and "The staff are very caring and kind, we can always rely on them."

People's care plans reflected their needs and gave staff the information they needed to support them. People and, where appropriate, their relatives were involved in the care planning and review process to ensure people's care plans were person-centred.

People told us the service was well-led. Comments included, "[Registered manager] is nice and gets things done when you need help" and "It's a well-managed place, [registered manager] is nice and we know her." There was a kind and caring culture amongst staff at the service.

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

Rating at last inspection

The last rating for this service was good (published 8 February 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Fulwood Court

Detailed findings

Background to this inspection

The 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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

This inspection was carried out by one inspector.

Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought or rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support.

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 inspection was unannounced.

What we did before the inspection

We checked the information that we held about the service. This included statutory notifications sent to us by the provider about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send us by law. We also gathered feedback about the service from the local authority and used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection

We spoke with five people who lived at the service about their experience of the care provided. We spoke with four members of staff including the registered manager, senior care worker and other care workers.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at Fulwood Court. Comments included, "Oh yes I'm very safe" and "Yes I do feel safe, I get on well with the staff and I trust them."
- Policies and procedures were in place to guide staff in relation to safeguarding vulnerable adults and whistleblowing.
- Staff received training on this topic and information about raising safeguarding concerns was readily available in various places throughout the service.
- Records showed that staff at the service took appropriate action when any such concerns arose.

Assessing risk, safety monitoring and management

- People had personalised risk assessments in place and these were reviewed regularly.
- People's risk assessments gave staff the information required to help mitigate any identified risks and demonstrated good partnership working with other health care services where necessary.

Staffing and recruitment

- There was an appropriate number of staff employed to meet the needs of the people supported by the service.
- People told us they felt there were enough staff available to support them. One person said, "The staff are always there for anything I need."
- Staff were safely recruited by the service. Records showed that the required pre-employment checks, such as criminal records checks, had been carried out. This ensured that only people who were suitable to work with vulnerable adults were employed by the service.

Using medicines safely

- Medicines were safely administered, stored and recorded by staff who had the required knowledge and skills.
- People told us that staff supported them with their medicines correctly and at the right times.
- The service also had systems in place to ensure the safety and quality of medicines administration was maintained.

Preventing and controlling infection

- Staff had received training on infection prevention and control and had access to personal protective equipment (PPE) when necessary.

Learning lessons when things go wrong

- We saw that accident and incident policies and procedures were in place and there was a system to record any accidents and incidents that had occurred.
- Staff we spoke with knew how to safely and effectively manage these situations.
- Records showed that appropriate action had been taken in response to any accidents and incidents that occurred, and staff regularly reviewed this information to help identify any emerging patterns or trends that needed addressing.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant 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 effectively assessed before they were supported by the service. This ensured that staff had the skills and capacity to safely and effectively meet people's needs. The information from the assessment formed the details of the care plans and risk assessments.
- People's needs in relation to equality and diversity were considered during the assessment and care planning process, such as age, disability and religion.

Staff support: induction, training, skills and experience

- New staff were appropriately inducted into their role at the service and staff received ongoing training relevant to their roles.
- Staff were supported with regular supervisions and annual appraisals. This provided staff and senior staff with a formal opportunity to discuss performance, any concerns and to address any training needs.
- Staff told us that they felt well-supported in their roles.

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

- People received the support they needed from staff to ensure they had enough to eat and drink.
- People told us they were happy with the support they received with their meals and drinks.

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked effectively with other healthcare professionals to ensure people's health and wellbeing was maintained. This included assisting people to access other healthcare services when necessary.
- Staff were attentive to changes in people's health and support needs and made referrals to appropriate healthcare professionals in a timely manner.

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 when this is in their best interests and legally authorised under the MCA. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their

liberty.

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- At the time of our inspection none of the people supported by the service had any restrictions in place.
- People had given their consent to their care and treatment.
- People and, where appropriate, their families had been involved in making decisions about their care.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant 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

- All the people we spoke with gave us positive feedback about the staff at the service. Comments included, "The staff are good, we have a laugh and a joke" and "The staff are very caring and kind, we can always rely on them."
- Staff knew the people they were supporting well, including their needs and preferences.
- Staff treated people as individuals with individual needs and we saw they interacted with people in a warm, friendly and caring manner throughout our inspection.

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

- People told us that staff supported them as per their needs and preferences.
- People and, where appropriate, their relatives were involved in making decisions about their care and we were told there was good communication between staff, people supported by the service and their relatives.
- Staff supported people to access advocacy services where this was needed.

Respecting and promoting people's privacy, dignity and independence

- People told us staff respected their privacy and treated them with dignity and respect. People commented, "The staff treat us with dignity and respect at all times, they're very respectful", "Staff respect that I am a person" and "[Staff] are sensitive helping with washing and dressing."
- Staff supported people to maintain as much independence as possible. People commented, "[Staff] encourage me to be as independent as possible and help me when I need them to" and "[Staff] help me to be independent, they let me get on with the simple things I can do for myself."
- We found that people's confidential information, such as care plans, was stored securely and only people who required access could do so.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The care plans we looked at reflected the needs of the people supported by the service and were regularly reviewed. Care plans contained relevant information about the individual, such as their background, communication methods, health, emotional, physical health, spiritual and cultural needs.
- People and their relatives were involved in the care planning and review process to ensure people's care plans were person-centred.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Care plans contained information on how to meet people's individual communication needs, ensuring people were communicated with in ways they could understand.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The service organised a range of activities that people living at Fulwood Court could take part in if they wished to do so. These included film nights, quizzes, hymn singing, indoor gardening, painting and visits by children from a local nursery.
- The service also supported people to keep up with their religious preferences. For example, representatives from local churches of different denominations regularly visited the service.

Improving care quality in response to complaints or concerns

- The service had not received any formal complaints since our last inspection. However, the service had relevant policies and procedures to manage this if and when required.
- People told us they would feel comfortable raising concerns if necessary and we saw information about making a complaint was accessible.

End of life care and support

- None of the people supported by the service were receiving end of life care at the time of our inspection. However, we found that people's wishes on their end of life care had been discussed, documented and plans put in place to ensure that their preferences were met. This included recording people's wishes regarding resuscitation.

- Staff were supported with relevant training to meet these needs and the service had links with other relevant health professionals to ensure people's end of life care needs were effectively met.
- One relative had written to the service to thank them for this aspect of care provided. They commented, '[Relative] was so grateful to all of you for the care you gave her. I'm so grateful for the fact [Relative] didn't have to go into hospital at the end and that staff were able to help her see through her last few nights.'

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; and how the provider understands and acts on their duty of candour responsibility

- There was a kind and caring culture amongst staff at the service. Staff treated people with respect and staff and people supported by the service had friendly and positive relationships.
- Staff and people supported by the service gave us positive feedback about the registered manager and their leadership of the service. Comments included, "[Registered manager] is nice and gets things done when you need help" and "It's a well-managed place, [registered manager] is nice and we know her."
- The registered manager understood their responsibility regarding the duty of candour and there was an open and transparent culture at the service.
- All the people we spoke with were familiar with the registered manager and felt they could approach her with any concerns.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Ratings from the last CQC inspection were clearly displayed within the service, as required.
- The registered manager had notified the CQC of all significant events which had occurred in line with their legal obligations.
- There were clear lines of accountability and a stable management team at the service.
- The service had a range of policies and procedures in place that staff were able to access if they needed any guidance. We saw that these policies and procedures were up-to-date and regularly reviewed.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The service invited people's feedback in various ways, including surveys, during care plan reviews and regular residents' meetings.
- The registered manager also held regular staff meetings. These meetings were documented and provided staff with the opportunity to receive and share any important information.

Continuous learning and improving care

- The registered manager had a range of regular audits in place to monitor, assess and improve the quality and safety of service being provided at the service. These ranged from environmental and health and safety checks to medicines audits.
- The registered manager was also supported by the registered provider's head office staff. This support

included regular CQC-style internal inspections.

Working in partnership with others

- Staff at the service worked with other health and social care professionals to ensure people's health and wellbeing was maintained.
- We saw that referrals to other health services were managed well and appropriately followed up on.