

Cade Care Limited

Church Road

Inspection report

144 Church Road
Bolton
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18 November 2021

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Ratings

Overall rating for this service	Outstanding 
Is the service safe?	Good 
Is the service effective?	Good 
Is the service caring?	Outstanding 
Is the service responsive?	Outstanding 
Is the service well-led?	Outstanding 

Summary of findings

Overall summary

About the service

Church Road is a small residential care home providing personal care and accommodation to people with learning disabilities, or autistic spectrum disorder and/or mental health issues. The home is located in Bolton, Greater, Manchester. The home registered with the Care Quality Commission (CQC) to accommodate up to six people. There were six people living at the home at the time of the inspection.

People's experience of using this service

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

The feedback we received about the care provided at Church Road was extremely positive. Without exception, relatives and people who used the service consistently told us how caring and compassionate the staff team were, treating them with the upmost respect. There were several examples of where the staff had gone 'above and beyond' to ensure people received high quality care and support. The service used a number of different and distinctive ways to involve people in how the home was run. We saw a number of excellent examples where staff had gone the extra mile for people in relation to protected equality characteristics.

The staff team had been very creative in enabling people to stick to their normal routines and continue doing activities they enjoyed during lock down. Where people had enjoyed participating in certain hobbies when they were younger, the service had gone to great lengths to enable people to carry out these activities they had participated in during their childhood.

There was an exceptionally positive culture in the service. Staff consistently told us how much they liked working at Church Road, whilst feeling supported and very motivated to carry out their roles effectively. The feedback we received about management and leadership was very positive and it was clear the whole staff team were truly committed to ensuring people experienced person-centred care. The service had developed a number of links within the local community and worked in partnership with other organisations to ensure people received positive outcomes regarding their care and support. Health care professionals spoke very highly of the service and as a result, people experienced fantastic outcomes.

People told us they felt safe using the service and staff displayed good knowledge about how to protect people from the risk of harm. People received their medicines as prescribed and staff were trained in how to administer this safely. Appropriate staff recruitment checks were carried out and there were detailed risk assessments in place regarding the support people received.

People received the support they needed to eat and drink and were involved with shopping and creating menus which contained their favourite foods. Staff told us they were happy with the level of training, support and supervision available to assist them in their roles. 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.

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 'Inspected but not rated' (published October 2020). This was a planned focussed inspection in line with our inspection programme due to COVID-19. We do not look at all the five key questions during a focussed inspection. During the inspection we looked at two key areas of safe and well-led. Therefore, the service was not given an overall rating.

Why we inspected

This was a planned inspection based on the previous rating and because the service did not have an overall rating since they registered with CQC in 2019.

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 extremely caring.

Details are in our caring findings below.

Outstanding 

Is the service responsive?

The service was extremely responsive.

Details are in our responsive findings below.

Outstanding 

Is the service well-led?

The service was extremely well-led.

Details are in our well-led findings below.

Outstanding 

Church Road

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried out by an inspector.

Service and service type

Church Road is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. Registered managers and providers are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

The inspection was announced. We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the registered manager would be at the location to support the inspection.

Inspection activity was carried out between 29 October and 18 November 2021. We visited the home on 29 October 2021 as part of our site visit to the service.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from professionals who worked with the service, including Bolton local authority. We 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.

During the inspection

We spoke with three people who used the service about their experience of the care provided, as well as five relatives. We also spoke with seven members of staff including the registered manager, deputy manager and four support workers. We also spoke with three healthcare professionals involved with the service.

We reviewed a range of records. This included three people's care records and a selection of medication administration records (MAR). We also looked at three staff files to check staff were recruited safely. A variety of other records relating to the management of the service were also considered as part of the inspection.

After the inspection

We continued to seek clarification from the service to validate evidence found following our site visit.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as 'inspected but not rated'. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- There were enough staff to care for people safely. Staffing was based around people's individual routines and what they had scheduled such as activities or appointments. The feedback we received was that staffing levels were sufficient.
- Each person had a minimum of 1:1 support in place, with certain people requiring more staff depending on the level of assistance they required. We observed staff were always present with people during the day, helping them with any tasks they needed support with, or going out into the community.
- The staff spoken with during the inspection said staffing levels were sufficient. One member of staff said, "We have always got staff. We had difficulties in lockdown, although arrangements were always made to make sure we had enough."
- Staff were recruited safely and we found all relevant checks had been carried out prior to them commencing their employment. One member of staff said, "I had an interview and was asked to provide references and a DBS."

Assessing risk, safety monitoring and management; Preventing and controlling infection

- Each person using the service had a range of detailed risk assessments in place regarding the care and supported they required. Where risks were identified, control measures were detailed about how to keep people safe.
- Regular checks of the building were carried out to ensure it was safe for people to live in. This included gas, electricity, fire, emergency lighting and portable appliance testing (PAT).
- People were protected from the risks of the spread of infections. The home was clean and tidy, with any domestic duties being the responsibility of staff. People living at the home were encouraged to be involved with any cleaning duties to increase their independence and living skills if they were able.
- Staff told us they completed regular COVID-19 testing and that this was monitored.

Systems and processes to safeguard people from the risk of abuse: Learning lessons when things go wrong

- People and their relatives told us they felt the service was safe. One relative said, "My son is as safe as ever has been and that is the whole point of living there."
- Staff had an understanding about safeguarding and were able to describe the different types of abuse that could occur and how to report concerns. Staff were also aware of whistleblowing procedures should they need to report any bad practice.
- A safeguarding policy and procedure was in place and provided information about how to escalate concerns.
- Systems were in place for when things went wrong. Accidents and incidents were monitored closely, with

details recorded about actions taken to prevent re-occurrences.

Using medicines safely

- Medicines were managed safely. Staff had completed training and their competence to administer medicines was regularly assessed to ensure their skills remained up to date.
- Medicines administration records were complete and up to date and regular medicines audits took place.

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.

This is the first time we have rated effective for this newly registered service. This key question has been rated as Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience; Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- An induction programme was provided when staff first commenced their employment. Staff who had not worked in a care job previously completed the care certificate to give them a thorough understanding about the position. One member of staff said, "The induction prepared me well for the role."
- A training matrix was used which showed the different courses staff had completed. Additional training was also arranged that was specific to peoples' needs. Staff spoke positively of the training provided and said enough was available to support them in their roles. One member of staff said, "The training has been good and they have pointed me in the right direction."
- Staff supervisions were carried out and gave staff the opportunity to discuss their work and receive feedback about their performance. An annual appraisal schedule was also in place and these took place throughout the year.
- The care and support people needed to receive from staff had been captured as part of the initial assessment process and was recorded within care plans. People's assessments were planned carefully, with measures taken to ensure the home was the right place for them to live. For example, staff working at other services to gain an understanding of the person's routine and how they wanted their care to be delivered.

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

- People received the support they needed to eat and drink. The home had a communal kitchen with suitable cooking facilities to enable people to cook their own meals if possible. Some people were independent regarding their eating and drinking, whilst staff were required to support others with certain aspects of the preparation.
- People were involved in the creation of menus and were able to go shopping with staff.
- Care plans provided details about people's nutritional needs and the support staff were required to provide. People's weight was monitored so that appropriate action could be taken if people were losing or gaining inappropriate amounts of weight.
- Encouraging people to make healthier choices was encouraged as much as possible. One person was now eating much healthier, having moved to Church Road only eating junk food. Another person had lost a substantial amount of weight, after being highlighted as being at risk of diabetes. This had been done through eating better and doing regular exercise. The person had reported feeling much better about themselves as a result.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live

healthier lives, access healthcare services and support

- Staff assisted people to healthcare appointments, if they were unable to attend on their own. Health care passports had been created and were available in people's care plans. These provide an overview of a person's care needs should they need to go to hospital.
- People's care and support plans contained details about health appointments they had attended such as the chiropodist, dentists, doctors and opticians.

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.

Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, the deprivation of liberty safeguards (DoLS) cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty.

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

- Staff had an understanding regarding the MCA and were able to describe when decisions needed to be taken in people's best interests.
- Best interest meetings and capacity assessments were completed as required where people lacked the capacity to make their own choices and decisions. These were decision specific regarding people's understanding of certain areas.
- DoLS applications were submitted to the local authority as required.

Adapting service, design, decoration to meet people's needs

- The home is a new facility, built in 2019, with modern furnishings and fittings throughout.
- Around the home there were displays of photos from events within the service that people had been involved in and outings.
- The home was adapted as necessary to accommodate people's individual preferences and support needs. For example, the creation of a sensory room for one person due to it not being accessible during lock down.

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.

This is the first time we have rated caring for this newly registered service. This key question has been rated as Outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- The feedback we received about the care provided at Church Road was extremely positive. Without exception, relatives and people living at the home consistently told us how caring and compassionate the staff team were, treating them with the upmost respect.
- Comments from relatives about the care provided at the home included, "I think it is outstanding. They have effectively rescued my son from a downward spiral" and "It is excellent and I am very pleased with it. Outstanding, brilliant and I love it. Staff are lovely and very helpful. They make him very happy" and "I would say it is 100%. From what I can see they are an outstanding service."
- Health care professionals also provided very positive feedback about the support provided at Church Road. One comment included, "I would say they are outstanding. They have done excellent work with people in establishing a quality of life and developing their skills. Families are reassured and people are happy to be there. They have avoided hospital admissions for one person I work with." Another healthcare professional said, "The staff offer excellent care. People have dedicated staff teams who work in person centred ways to meet their needs."
- There were several examples of where the staff had gone 'above and beyond' to ensure people received high quality care. One person was very close to their father, who had passed away as a result of COVID-19. Staff made the person a teddy bear out of one of their father's jumpers. Trauma training had also been provided for staff to understand how the person may be grieving. The bear also contained their father's ashes and we saw photographs of the person sitting with the bear, giving them comfort. Another person moved into Church Road with very few limited life experiences and had never been able to celebrate their birthday, or be given a cake. Staff made a fuss of this person during their recent birthday and held a house party to celebrate the occasion.
- We saw a number of excellent examples where staff had gone the extra mile in relation to protected equality characteristics. Staff worked with a local mosque to better understand one person's cultural needs in more detail, with the person now supported to attend the mosque regularly. Another person had been supported to attend a local 'Pride' event and had enjoyed exploring with different colours and clothing choices.

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

- The service used a number of different ways to involve people in how the home was run. Staff matching tools were completed to enable new support workers of similar interests and backgrounds to care for people. This took into account things of importance, interests, qualities and preferred gender and if they wanted to take part in the interview process.

- One person expressed an interest in being involved with the recruitment of the staff who would be supporting him and wanted to be part of the process from start to finish. The person helped deliver leaflets, advertising support worker roles at Church Road in the local community. The person then went on the interview one their support workers and wrote a letter to the manager about his experience and not wanting the member of staff to leave.
- Two people had chosen the colour and decoration schemes of their bedrooms and both helped paint the walls with designs of particular importance to them such as favourite football teams and items of importance, some of which had been agreed through their initial assessment. One of these people also designed the layout of the home's new sensory garden, helped build it, and contributed toward its upkeep and maintenance. They had previously had a keen interest in gardening.

Respecting and promoting people's privacy, dignity and independence

- Relatives said staff always treated people with dignity and respect. One relative said, "Since coming to Church Road, my son has been treated with the care and attention he needs. I am so grateful."
- Staff were aware of how to promote people's independence and we saw people's care plans took into account things people were able to do for themselves without staff support. Where people were more reliant on staff than others, they were kept involved with smaller household chores such as Hoovering, stripping bedding and peeling vegetables at mealtimes.

Is the service responsive?

Our findings

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

This is the first time we have rated responsive for this newly registered service. This key question has been rated as Outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control; 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 staff team had been very creative and extremely responsive in enabling people to stick to their normal routines and continue doing activities they enjoyed during lock down. For example, a pub had been created in the back garden known as the 'Cade Care Arms' following the closure of pubs in 2020. Food and drink menus were created so that people could choose their favourite pub meals and enjoy and alcoholic drink if they wished.
- Another person liked to routinely visit McDonalds. Due to its closure, staff had anticipated this could cause distress to the person and had gathered lots of different McDonalds packaging, just prior to lock down so that food items such as chicken nuggets, chips and burgers could be given to the person in the same form. Staff took the person through the drive through even though it was closed and sat on the tables in the outdoor seating area to create the same experience for this person.
- Further examples of the service responding to establishments being closed during lockdown included the purchase of a pet rabbit. Several people often enjoyed visiting animals in the local community and took great satisfaction in seeing them. The rabbit enabled people to still care for and see an animal and had been instrumental in maintaining people's well-being. Weekly 'Come dine with me' evenings were held, due to people not being able to visit their favourite restaurants. Musical instruments were also purchased, due to people not being able to attend music groups in the community.
- The service had gone to great lengths to enable people to carry out activities and hobbies they had participated in during their childhood, or younger years. This included supporting people to go swimming and the purchase of a pool table where one person wished to join a local team. Another person had been re-introduced to visiting church and was supported to attend by staff.
- Each person had their own support plan in place, as well as records of things they had been supported to do by staff, such as any assistance with personal care. Support plans contained lots of person centred information about people and things of importance staff may need to know.

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.

- Support plans contained information about people's communication needs such sight, hearing and people's abilities to read and write.

- Information could be provided in different formats if required such as large print. Various easy read documents were used and contained pictures and symbols people could relate to and understand easier. Interpreter services were also available if needed.

Improving care quality in response to complaints or concerns

- Complaints were handled appropriately. A complaints policy and procedure was available, explaining the process that would be followed.
- People knew how to provide feedback about the care they received, although people told us they had never had reason to make a formal complaint.
- A number of compliments had also been received, where people had expressed their satisfaction with the service provided.

End of life care and support

- Nobody was in receipt of end of life care at the time of the inspection. We were told care plans would be created and the relevant professionals contacted should people's care and support needs change.

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 'inspected but not rated'. At this inspection this key question has now improved to Outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was an exceptionally positive culture in the service. The visions and values were imaginative and people were at the centre of how the service was provided. As detailed in the Caring and Responsive domains of this report, people received high quality, person centred care which was based on their likes, personal preferences and routines. The service strived to make sure this was at the heart of how the service was run.
- Staff consistently told us how much they liked working at Church Road, whilst feeling supported and very motivated to carry out their roles effectively. Comments from staff included, "I love the job. They appear very, very committed here and the owner always makes an effort to talk with you when she comes in" and "I am very happy in my job. Staff are happy and we have a very happy house. Every day is different and is rewarding" and "I have worked here for a year and it has been brilliant. It has gone very well and is a very good place to work. You get all the support you need."
- The feedback we received about management and leadership from staff was very positive and it was clear the whole staff team were truly committed to ensuring people experienced high quality care. Comments from staff included, "In terms of the day to day management, I cannot fault it. All the managers know who you are and it is really good" and "It is outstanding and one of the best managers I have had. Always there to talk with and you can have a good laugh" and "I couldn't ask for better. They never act as though they are superior. There is no discrimination and everyone is welcomed."
- The feedback from relatives was equally positive about the leadership of the service. One relative commented, "It appears to be a very well managed service. They answer all my questions and everything is put right." Another added, "It is brilliant. I can't fault it and there is always someone to speak with."
- There were several examples where the registered manager and other staff at Church Road had gone the extra mile to support people living at the home and the staff team. For example, participating in Ramadan each year to help certain staff get through the fasting period. One member of staff had also been stuck in another country during lock down. Their flight was paid for by the service so the member of staff was able to return home safely.
- All staff followed an internal career progression plan to help them develop and through an identified career path of their choosing. Four previous Church Road support workers had now moved into more senior roles within the service, such as team leaders and deputy managers as a result of the career progression plan that was in place.

Working in partnership with others

- The service had developed a number of links within the local community and worked in partnership with other organisations to ensure people received positive outcomes regarding their care and support. One of these included being part of the 'Gr8 support movement', which enabled care providers to connect with each other and promote learning. The service had been able to share several pieces of excellent work done with people living at the home as part of this project, particularly during lockdown. Staff at Church Road were also nominated for the 'Autism Good Practice Award' at the National Learning Disabilities and Autism Awards. The nomination was based on the work the team have done to improve the life of people in teaching them life skills and introducing them to a range of community opportunities. This meant people's experiences were extremely person centred as result of this good practice.
- Church Road participated in the 'Bolton's Big Contribution' which is a scheme run by the local authority to improve healthcare services in the local area. People were supported to attend and communicate their views. This meant people were full involved with decisions effecting their care and could become important members of the local community.
- Church Road were members of a local 'meet and match' group, which is a dating and friendship agency for people with learning disabilities. The nominated individual is a director for this scheme on a voluntary basis. One person had made new friends as a result and enjoyed seeing them when attending the group.
- Health care professionals spoke very highly of the service and the work done with people living at Church Road. One healthcare professional said, "Outstanding. The manager is responsive, thorough and dedicated. She is an advocate to strive for excellence."
- As a result of people living in an environment which focussed on building seamless experiences for people based on good practice and people's informed preferences, people experienced fantastic outcomes. For example, one person had been supported to attend the beach for the first time, although this had previously been highlighted as a risk due to staff not being sure how they would react around sand due to their sensory requirements. Another person was working towards accomplishing the goal of travelling overseas for the first time. Staff were working closely with this person and had already supported them to go on several shorter trips in the UK to make sure the person was comfortable being away from their familiar environment.

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

- Staff meetings took place in the service which gave an opportunity to discuss work and improve the service people received. Staff said these took place regularly and they felt able to discuss any areas of concern and improvements. Staff surveys were also sent to gather views.
- The views and opinions of people were gathered through regular meetings with their support team.
- A range of policies were available, as well as a service user guide and staff handbook. An active website was also in use which provided an overview of all the homes operated by Cade Care. This ensured people who used the service, staff and members of the public could access to important information about procedures within the service.

Managers and staff being clear about their roles, understanding quality performance, risks, regulatory requirements; Continuous learning and improving care and How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong:

- Audits were completed to ensure there was continuous oversight of the service.
- Statutory notifications were submitted to CQC as required such safeguarding concerns.
- Confidential information was stored securely and we saw documents such as care plans and staff recruitment files were stored in the main office which was always locked.

