

Cade Care Limited

Church Road

Inspection report

144 Church Road
Bolton
BL1 6HJ

Tel: 07444371559

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Good ●
Is the service well-led?	Good ●



Summary of findings

Overall summary

About the service

The service was registered to provide support to up to six people and there were five people using the service at the time of our inspection. The service has been designed taking into account best practice guidance and the principles and values underpinning Registering the Right Support.

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.

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

Staff had completed safeguarding training and demonstrated a thorough understanding and knowledge of the issues and how to report any concerns. Staff were recruited safely and staffing levels were appropriate to meet the complex needs of the people using the service.

Medicines were managed safely. Staff followed the infection control policy and procedures to reduce the risk of any cross infection within the home. Extra infection control measures had been implemented during the Covid-19 pandemic.

General and individual risk assessments were in place and updated as required. Positive risk taking was supported in order to ensure a good quality of life. The support provided was extremely person centred and a variety of communication methods were used to ensure people were fully involved in all aspects of their care and support. Staff were enthusiastic and highly motivated, worked creatively and were fully supported by the management team.

A range of quality audits and analysis were completed to help ensure continual improvement to service provision. The service worked effectively with all health and social care partners.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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

Rating at last inspection

This service was registered with CQC on 28 May 2019 and this is the first inspection.

Why we inspected

This was a planned inspection in line with our inspection programme. We have made changes to the way we work due to Covid-19. This is to avoid putting pressure on services that are caring for people. We completed a focussed inspection. During this inspection we looked at two key areas, safe and well-led. We do not look at all the five key questions during a focussed inspection. Therefore, the service was not given an overall 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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

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.

Inspection team

The inspection was carried out by one 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 CQC. 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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We reviewed information we had received about the service. We sought feedback from the local authority. A variety of records relating to the management of the service, including policies and procedures were sent to us and reviewed. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and observed others within the care setting. We spoke with four members of staff including the registered manager, the deputy manager and two members of support staff. We also spoke with the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

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

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with three relatives and contacted three health and social care professionals who work with the service.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The home had an appropriate and up to date safeguarding policy. Staff had completed safeguarding training and those we spoke with demonstrated a thorough understanding and knowledge of safeguarding issues and how to report any concerns.
- Staff were confident to use the whistle blowing process in the event of witnessing any poor practice.

Assessing risk, safety monitoring and management

- Health and safety information and certificates were in place and up to date.
- General and environmental risk assessments had been completed and were updated as required.
- Support plans included individual risk assessments with clear techniques for staff to follow to minimise the risks outlined.

Staffing and recruitment

- Staff were recruited safely and in line with the company's recruitment policy.
- Staffing levels were high due to the complex needs of the people using the service. The staff teams possessed the skills and knowledge to ensure people were supported effectively.

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.

Preventing and controlling infection

- The staff followed the infection control policy and procedures to reduce the risk of any cross infection within the home.
- The service had adequate supplies of appropriate personal protective equipment (PPE) for staff to use as required.
- The provider has assessed the impact on residents of how PPE may cause fear and anxiety for residents, particularly those who have limited mental capacity and has mitigated these concerns.
- All areas were uncluttered so cleaning can take place effectively.

Learning lessons when things go wrong

- Accidents and incidents were well documented and addressed with appropriate actions.
- The service ensured they analysed any incidents and took learning from these in order to continually improve practice.

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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- Observations of interactions and information within care files demonstrated extremely person-centred support.
- A variety of communication methods were used to ensure people's full involvement in discussing their support, wishes, preferences, interests and aspirations.
- Positive risk taking was supported at the service in order to ensure a good quality of life. We saw evidence of real progress towards people's goals. A staff member told us, "Trust is important in order for people to progress."
- Staff were enthusiastic and highly motivated and worked creatively to ensure people were supported in the least restrictive way. They completed values-based training which emphasised being proactive rather than reactive to behaviour that may challenge the service.

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

- Complaints were responded to promptly and appropriately.
- The registered manager had an open door policy for staff, people who used the service and their relatives to discuss any issues or concerns.

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

- Notifications were submitted to CQC as required.
- The management team were aware of their responsibilities and staff demonstrated a thorough understanding of what was required of them within their roles.
- A health care professional told us, "I have nothing but praise for this organisation and especially the staff team continuing to ensure that the person they support continues to live within his local community in the least restrictive environment possible. A big part of this is the fact that there is very good leadership skills in place, the staff team are experienced, appropriately trained and also have the knowledge to support to continue to proactively support [person]."

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

- Care plans included a range of documents in easy read or pictorial formats to help ensure people were

included and could contribute to their support plans.

- Relatives also felt fully involved. One relative said, "I'm informed of everything that goes on. They phone every day to let me know how [person's] day has been." Another relative told us, "[Person] has made great progress. The staff have an interest and address themselves to the issues of autism, don't just punish people. They take an interest in [person], he feels liked and he is happier in himself."
- Staff reported excellent support from the management of the service. One staff member said, "We are completely backed. It is the best job I have ever had".

Continuous learning and improving care

- All aspects of care and support, goals and achievements were audited to ensure people were supported effectively.
- A large number of environmental, safety, care and staff audits were completed and any issues identified were followed up with appropriate actions.
- The company's head office audited and analysed aspects of the service and an outside company audited safeguarding concerns on an annual basis to aid learning and improvement.

Working in partnership with others

- The service worked well with all health and social care partners. One health professional told us, "The management team continue to proactively engage with all of the external members of the multi-disciplinary team and will follow up any actions effectively."