

Bolton Cares (A) Limited

Bolton Extra Care

Inspection report

Rushey Fold
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Bolton
BL1 3JS

Tel: 01204337650

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20 November 2023

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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

Bolton Extra Care provides care and support to people living in specialist 'extra care' housing. The service provides personal care to people living in their own homes within the extra care schemes. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service. There were 191 people using the service at the time of the inspection.

Not everyone who used the service received personal care. 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.

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

People who used the service told us they felt safe. Risk assessments were in place where people had specific medical conditions. Staff had received safeguarding training and knew how to raise any concerns. Medicines had been administered safely and staff had received appropriate training in this area.

Staff had a clear understanding of infection control practices they were to follow. Regular one-to-one supervisions had been conducted and a variety of training had been provided to ensure staff were supported and had the skills and knowledge to carry out 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.

People told us staff were kind and caring and treated them with dignity and respect. Care plans contained person-centred information. Regular reviews of people's care and support had been completed to ensure people's needs were being met. A complaints procedure was in place and people told us they knew how to raise a concern.

The management team requested feedback from people who used the service. Quality assurance processes were in place and these had been effective in identifying any shortfalls. Staff told us the management team were approachable and they had an open-door policy. People who used the service said they were listened to and respected. They told us the service was well-led by an experienced management team.

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 on 7 March 2018.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Bolton Extra Care on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Bolton Extra Care

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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by 1 inspector.

Service and service type

This service provides personal care 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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there were 2 registered managers in post.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered managers would be in the office to support the inspection. We wanted to be sure there would be people at home to speak with us.

Inspection activity started on 17 November 2023 and ended on 20 November 2023. We conducted a site visit on 17 November 2023.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We asked the local authority and the local Healthwatch team to share feedback about the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

During the inspection

We spoke with 5 people who used the service. We also spoke with 8 staff including 2 registered managers, 2 team leaders and 4 care staff. We also reviewed feedback that was prompted by inspection activity from 2 relatives.

We reviewed a range of records. This included 4 people's care records and multiple medication records. We looked at 2 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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Staff received training and were confident of the process to follow if they had any safeguarding concerns. One staff member commented, "Safeguarding training has been very thorough."
- There was a safeguarding policy in place which included local safeguarding contact details and outlined the various types of abuse.
- People told us they felt safe. Comments included "I feel safe, I love it here. The staff check on me regularly, in person or over the call system" and "I feel safe here, I trust the staff and the building is secure."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Safety monitoring was effective. The registered managers ensured that risk assessments were completed to inform staff of any risks. Risk assessments were detailed, reviewed regularly, and provided guidance on how to support people safely.
- Accidents and incidents were recorded, reviewed and action was taken to mitigate the risk of reoccurrence. A registered manager shared that safeguarding incidents were subject to a full analysis and a lessons learned process was in place.
- Feedback from people and staff was listened to and acted on to improve the service. Feedback surveys were issued annually as a minimum.
- The management team had a clear system to monitor care calls to help ensure they were not missed. A relative told us, "I don't live nearby so we are so grateful and feel that our loved one is in very safe hands."

Using medicines safely

- Medicines systems were effective. People told us they were supported with their medicines appropriately.
- Staff were trained to administer medicines. Spot and competency checks were carried out regularly to check staff were continuing to work in line within good practice guidelines.
- The management team ensured that Medicine Administration Records (MARs) were regularly audited. The management team had followed up on any actions.

Staffing and recruitment

- The provider operated safe recruitment systems, which ensured suitable staff were employed. The provider was a large organisation and there was a human resources department to support the registered managers with any HR processes. A registered manager told us they verified that staff had all had the necessary checks to ensure they were safe to work with people, before they commenced employment. This helped ensure a robust approach to managing recruitment.

- The provider shared that staff were not confirmed in post until they completed the internal probation programme.
- There were enough staff available to meet people's needs safely. People said staffing was consistent and staff knew how to meet their needs.

Preventing and controlling infection

- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. 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

- A detailed assessment was completed before a package of care was agreed. This was to ensure that the service could meet people's needs.
- People were involved in the assessment of their needs. One person told us that they could amend their care plan when they liked.
- People were involved in regular care reviews to make sure their care plan reflected their current needs.

Staff support: induction, training, skills and experience; Supporting people to eat and drink enough to maintain a balanced diet

- People were supported by staff who had received training appropriate to their role. One staff member said, "The training program is comprehensive, there is funding available to do vocational courses too."
- Staff told us they had regular supervision sessions with their manager. There was an out of hours on-call provision so staff could seek support at any time.
- People felt staff were skilled. One person said, "The staff are proactive, they all seem to know what they are doing."
- Staff supported people to meet their nutritional and fluid intake needs as specified in the care plan and as people wished. One person said, "Staff support me with meals as I am not always good at making myself healthy dinners."
- Staff understood people's dietary needs and associated risks were planned for. For example, allergies or risk of choking.

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

- People were supported to live healthier lives. A registered manager described a healthy eating initiative the provider had arranged where fresh fruit and healthy snacks were made available to people. This helped to educate and encourage people to make healthier choices.
- Staff worked alongside other agencies to provide person-centred and effective care. Records showed staff worked closely with other agencies such as the local authority and social workers.

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 MCA 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.

- People using the service had full capacity to make decisions about their care.
- People told us they were involved in making decisions about the care and support they received.

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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. 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

- People were supported appropriately with consideration given to specific cultural needs. Staff followed people's care plans which were person-centred and reflected people's individuality.
- All the people we spoke with were complimentary about the care they received. One person said, "The team are really good, we have a laugh. They keep me going day to day."
- Relatives also told us that staff were caring. One person's relative told us, "The staff are always kind and considerate and take the time to have a chat with [Name] at their visits. Another relative said, "[Name] has been surrounded by very caring staff who have a high sense of responsibility and a very caring and observant nature."

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People were supported to make decisions about their care and support. People told us staff asked how they would like to be supported on each visit. This meant that people were in charge of the care they received.
- People we spoke with gave examples of how staff maintained their privacy, dignity and independence, encouraging people to do as much as they could for themselves. One person said, "Staff always treat me with dignity and respect and encourage me to do what I can for myself." A relative said, "Staff enable [Name] to continue to live in their own home which as a family we are truly thankful for."
- People experienced positive outcomes. A registered manager shared many examples with us. They said, "We are hoping to develop the service further and support people under the 'discharge to assess' initiative." 'Discharge to assess' is needed when a patient is able to leave the hospital but isn't necessarily well enough to return to wherever they were previously living, usually following an acute change of need, illness or injury.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. 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; End of life care and support

- People were empowered to have as much control and independence as possible, including developing their care and support plans. Staff were knowledgeable about people and their needs. .
- Daily notes and monitoring were completed which gave an overview of the care people had received and captured any changes in their health and well-being.
- A registered manager informed us no one was receiving end of life care at the time of our inspection. We saw care plans contained information in relation to people's future wishes. If required, they would be able to put these arrangements in place.

Meeting people's communication needs Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs had been assessed. Care plans included a section for detailing people's communication abilities and needs. Staff understood people's communication needs.
- The provider could provide a range of accessible documents to support people's communication needs, including accessible policies.

Supporting people to develop and maintain relationships to avoid social isolation

- People were supported to develop and maintain relationships. The provider had an inclusion initiative to combat loneliness and isolation and offered a range of free activities. For example, pet therapy sessions had been arranged to help support wellbeing. There were also regular social events and luncheon clubs, evidence of outstanding effort from the staff team.
- People told us that they did not feel isolated. One person told us, "Activities seem to be picking up recently so I am spending more time with other residents again." A relative told us, "There's a strong sense of community and whenever I'm visiting, I feel like part of the family and love chatting to the other residents and celebrating with them."

Improving care quality in response to complaints or concerns

- People knew how to make a complaint. There was a complaints policy in place. Information about how to make a complaint was included in the customer service brochure and an accessible complaints policy was available.
- The registered managers ensured complaints were logged, and the actions taken to address them. There

was a system for auditing and learning from complaints.

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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained 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; Continuous learning and improving care

- People felt listened to and could influence the service they received.
- People and staff told us there was a positive and open atmosphere. One staff member told us, "There is a focus on workplace culture and openness which is great."
- Staff felt well supported and they were able to discuss any concerns with the management team.
- The provider shared their service improvement plan which showed how learning from feedback and incidents was actioned.

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

- Quality assurance systems in place to monitor the quality and safety of the service were effective. Team leaders supported the manager and provider in completing audits of all aspects of the service.
- People and their relatives told us they were kept informed about anything that might affect their care and support. The provider shared information with them if things went wrong.
- The registered manager understood when to inform CQC of events that happened in the service in line with their statutory responsibilities.

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

- The registered manager and staff understood their roles and responsibilities. Quality reports were produced by the management team to review and influence policy changes.
- Staff felt that the service was well organised and they understood their roles. One staff member said, "You know what's expected of you. All staff seem to provide high quality support. Any issues are sorted out quickly."
- There was effective communication maintained between the registered managers, team leaders and care staff. There were daily handovers to share information.
- Staff felt respected, valued and supported and that they were fairly treated. One staff member said, "I do feel listened to and kept informed about any changes." Staff were actively encouraged by the registered managers to raise any concerns in confidence. Another staff member said, "I would have no issue in raising concerns."
- The ethos of the service was to be open, transparent and honest. Staff told us the registered managers

and team leaders led by example.

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

- People told us they were asked for their opinion about the service. They felt the managers were effective and approachable.
- Staff said any suggestions they might have about the service were listened to and acted on.

Working in partnership with others

- The service worked in partnership and collaboration with other key organisations to support joined-up care and service development. Systems were in place and used effectively to continuously identify, analyse, monitor and review risks so people were provided with good care.
- The care team worked co-operatively with staff from other agencies working in the buildings the service was based in.