

Bolton Cares (A) Limited

# New Lane

## Inspection report

2-4 New Lane  
Brightmet  
Bolton  
Lancashire  
BL2 5BN

Tel: 01204337830

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06 May 2021

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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

New Lane is a short-term care home for up to seven people, which was set up in partnership with the Clinical Commissioning Group (CCG), Home Based Treatment Team (HBTT) and adult social care. The aim is to support people who would otherwise be treated in hospital, in a more relaxed, homely setting. People are supported by the service, as part of a wider team, to gain skills to manage their mental health. The length of stay is aimed at crisis intervention. At the time of our inspection, there were four people using the service.

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

Thorough assessments of people's needs, support plans and risk assessments were in place. Health and safety certificates, checks and risk were complete and up to date. Medicines were managed safely and the service adhered to appropriate infection control measures.

Staff were recruited safely and sufficient staff were deployed to ensure people's needs were met. The support provided was person-centred and inclusive. People's diversity was respected and their individual needs met appropriately.

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.

The service responded in an open and honest way with regard to complaints, feedback and suggestions. These were used to inform continual improvement to service provision. There were quality assurance systems in place to help ensure a continued high standard of support.

The service worked in partnership with a number of other agencies and professionals.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 3 October 2019).

### Why we inspected

The inspection was prompted in part by notification of a specific incident. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. We found no evidence during this inspection that people were at risk of harm from this concern.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained good. This is based on the findings at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

#### 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.

# New Lane

## 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

The inspection was carried out by one inspector.

#### Service and service type

New Lane 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 an acting manager but had been without a registered manager for a short while. However, the provider was being proactive in identifying a new registered manager to commence in the very near future.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

#### What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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. We used all of this information to plan our inspection.

#### During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with three members of staff including the manager, a senior support worker and a student social worker. We also spoke with a visiting health professional.

We reviewed a range of records. This included medication records. We looked at two staff files in relation to staffing issues.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at three people's care records and a variety of records relating to the management of the service, including policies and procedures were reviewed. We received feedback from three health and social care professionals who have regular contact 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.

At the last inspection this key question was rated 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

- There were appropriate systems in place to follow up any safeguarding concerns.
- People felt safe at the service. One person told us, "It [the home] is homely and welcoming."
- Staff completed safeguarding training and were aware of how to report any concerns.

Assessing risk, safety monitoring and management

- People's needs were thoroughly assessed by the clinical team who placed them, prior to accessing the service. Needs were then monitored continually throughout people's stay.
- The service ensured risk assessments and actions to mitigate risk were clearly documented.
- Staff were aware of the information within the care plans and risk assessments.
- Environmental, health and safety risk assessments were in place at the service. All required health and safety certificates were valid and up to date.

Staffing and recruitment

- Staff were recruited safely using an electronic human resources system.
- There was an up to date policy and procedure with regard to recruitment.
- Staffing levels were flexible to ensure they could meet the needs of people who used the service.
- People felt there were sufficient staff to make them feel supported. A person who used the service told us, "You always know waking [night] staff are there if you feel lonely or upset." Another person said, "If they [staff] are doing something and you start talking, they will stop what they are doing and listen to you."

Using medicines safely

- Safe systems were in place for managing medicines and the service had appropriate policies and procedures with regard to medicines.
- Staff completed medicines training and observations of practice regularly.
- Medicines records were complete and up to date and were audited regularly.

Preventing and controlling infection

- The service had safe infection control systems in place for visitors to follow. This helped minimize the risk of spreading infections.
- Regular training was in place for staff and they had completed specific training with regard to COVID-19 and the use of personal protective equipment.
- A person who used the service told us, "Staff are wearing masks and washing their hands all the time."

Learning lessons when things go wrong

- The service ensured lessons were learned from regular analysis of the accident and incident log.
- Complaints and safeguarding concerns were also used to inform learning.



# 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 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

- The support provided was extremely person-centred and inclusive. People told us they were helped by the staff to take back some control over their lives. One person said, "There is no pressure to do anything you don't want to do. It is a supportive network." Another person told us, "I would definitely recommend places like this. It's somewhere you can switch off and leave your problems until you are a bit stronger."
- Compliments received by the service included the comments, "Amazing the kindness of the staff and understanding without judgement", and, "Going home feeling more positive about the future".

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

- There was evidence that the service responded in an open and honest way with regard to complaints and suggestions.
- The service used a discharge form for people to complete at the end of their stay. This helped them understand what had worked well and anything they could improve on.

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

- Notifications were submitted to CQC as required and follow up information requested was sent in a timely way.
- The service had quality assurance systems in place to help ensure a continued high standard of support.
- Staff were able to explain their roles and responsibilities. One staff member said, "Screening is important, reading the care plans. We have very experienced staff here."

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

- The service fully considered people's equality characteristics. For example, cultural and religious needs could be supported with access to places of worship, provision of dietary requirements and support from a particular gender of staff.
- Staff helped people with practical issues, such as accessing benefits. One person told us, "Tiny things can be so helpful. The staff come across as human. They give simple, basic advice, but the right simple advice." Another person said, "All the staff go above and beyond for you."
- A health professional told us the staff were proactive in supporting treatment plans. They told us, "I always

first talk to staff and ask about the person's progress. I talk to staff after [seeing the person] about my thoughts and treatment. All staff are approachable and friendly."

#### Continuous learning and improving care

- The service took learning from analysing the results of their audits and quality checks.
- Feedback from people who used the service was important to the service in order to improve people's experience. For example, there had been issues raised around the effectiveness of the Wi-Fi provision at the service. This had now been rectified.

#### Working in partnership with others

- The service worked in partnership with a number of other agencies and professionals, including local authority teams and the Clinical Commissioning Group.
- A health professional told us, "The service engages very well via telephone and e mail. If they have any concerns, they ring us, we are constantly checking on our patients. They contact us appropriately if people are not following the clinical requirements."
- The service had links with Greater Manchester Training Partnership which had been beneficial in enabling staff to access more specialist training.