

## Community Care Options

# 1-3 The Courtyard, Unit 24

### Inspection report

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20 April 2023  
21 April 2023

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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

1-3 The Courtyard, Unit 24 is a domiciliary care service providing personal care to people living in the Bolton area. The service provides support to people with a learning disability and autistic people as well as people with mental health needs. 1-3 The Courtyard, Unit 24 also provides a supported living service at one separate location.

At the time of our inspection there were 32 people using the domiciliary care service and 6 people using the supported living service. 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. At the time of the inspection there were 15 people receiving personal care in total.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

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

#### Right Support:

Staff focused on people's strengths and promoted what they could do, so people had a fulfilling and meaningful everyday life. People had a choice about their living environment and were able to personalise their flats. Staff supported people with their medicines in a way which promoted their independence and achieved the best possible health outcome. Staff supported people to play an active role in maintaining their own health and wellbeing. People had access to education and employment where this was identified as their preference.

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/ did not support this practice.

#### Right Care:

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to their individual needs. Staff understood how to protect people from poor care, abuse, and harm. The provider had robust safeguarding systems which included working alongside other agencies when things went wrong. Staff had training on how to recognise and report abuse and they knew how to apply it. People could communicate with staff and understand information given to them because staff supported them consistently and understood their individual communication needs.

People could take part in activities and pursue interests tailored to them. The provider gave people opportunities to try new activities which enhanced and enriched their lives.

#### Right Culture:

People received good standard of care, support, and treatment because trained staff and specialists could meet their needs and wishes. Staff placed people's wishes, needs, and rights at the heart of everything they did. People and those important to them, including advocates, were involved in planning their care. Managers ensured risks of a closed culture were minimised so people received support based on transparency, respect, and inclusivity.

People told us they felt safe and knew how to raise concerns. Staff assessed health and safety risks and supported infection prevention and control processes. There were enough staff to meet peoples' needs and recruitment processes were ensured staff were suitable to work with vulnerable people. Peoples' health and nutrition needs were supported, and staff were aware of their responsibility to promote peoples' rights. Systems were in place to monitor quality and safety, and the provider sort regular feedback from people to improve their support.

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 20 July 2017)

#### Why we inspected

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

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 1-3 The Courtyard, Unit 24 on our website at [www.cqc.org.uk](http://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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# 1-3 The Courtyard, Unit 24

## 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 and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

1-3 The Courtyard, Unit 24 is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

The service also provides support to people living in 1 separate 'supported living' setting, so they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

#### 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 was a registered manager in post.

#### 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.

Inspection activity started on 19 May 2023 and ended on 21 May 2023. We visited the location's service on 19 and 20 May 2023.

#### What we did before the inspection

We reviewed information we had received about the service. We asked the registered manager to send us information relating to people's communication needs and asked the registered manager to gain consent from people and their relatives for us to visit or contact them. 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 sought feedback from health professionals who worked with the service. This information helped support our inspection and we used all this information to plan our inspection.

#### During the inspection

We communicated with 10 people who used the service and 6 relatives about their experience of the care provided. We observed people's care and their interactions with staff to understand their experience. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with 6 members of staff including the registered manager, service manager, team leader, and support workers. We reviewed a range of records. This included 3 people's support records and 3 medication records. We looked at 3 staff files in relation to recruitment. 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. 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 kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse.
- The provider had systems and processes in place to identify risks associated with people's care and support needs and actions were in place to reduce risks occurring.
- Staff received online safeguarding training and the registered manager had a good understanding of safeguarding thresholds and their responsibilities in escalating safeguarding incidents appropriately.

Assessing risk, safety monitoring and management

- Risks associated with the provision of people's support had been assessed. Risk assessments were detailed, and person centred.
- Whilst the provider did not have responsibility for people's accommodation, managers and staff worked closely with housing associations to address environmental risks.
- People lived safely and free from unwarranted restrictions because the service assessed, monitored, and managed safety well. One person told us, "I sometimes struggle with my confidence and staff are great at helping me; I never feel restricted, and they always ask for my consent."
- Staff could recognise signs when people experienced emotional distress and knew how to support them to minimise the need to restrict their freedom to keep them safe.
- People told us they felt safe and supported. One person said, "Staff know me well and help me to keep my flat and do the things I enjoy. I decorated my flat and staff helped me get it the way I wanted it. Staff help me with my monies and help me save up for things. I am saving for a holiday at the moment."

Staffing and recruitment

- The registered manager ensured safe levels of staffing to meet people's needs. Rotas were flexible and could be adapted to address people's wishes, activities, and appointments.
- The provider had effective recruitment processes. Recent records showed staff being recruited safely, with appropriate checks and competencies.
- The numbers and skills of staff matched the needs of people using the service, and managers ensured people's preferences were accommodated. Staff knew people well and could proactively support their needs, reducing communication difficulties and promoting emotional and physical health needs.
- Relatives told us they felt staff kept people safe. One relative said, "My relative has been supported by the same staff for a long time now; they have seen his needs change and they have made a massive difference to his health and communication. They are always really positive."

### Using medicines safely

- The provider had processes in place to ensure medicines were managed safely. Staff demonstrated a good understanding of how to administer medication and records were completed in line with the provider's policies.
- Staff were trained and competent to administer medicines and knew how to support people's individual needs. Managers adopted least restrictive practices to administer medicines.
- Managers ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism, or both) and managers were able to demonstrate people's medicines were reviewed by people's GP's regularly in line with these principles.

### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- 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 admitting people safely to the service.
- 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 promoting safety through the layout and hygiene practices of the premises.
- 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.
- Staff supported visits for people living in the service in line with current guidance.

### Learning lessons when things go wrong

- The registered manager ensured opportunities to learn were reported, recorded, and reviewed in line with the provider's policies.
- The provider managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately. Managers investigated incidents and shared lessons learned. People received safe support because staff learned from safety alerts and incidents.
- Staff told us they felt comfortable raising issues with the provider. One staff member said, "the managers are good at planning ahead and being proactive in avoiding incidents. When things do happen, everyone is supportive (of each other) and work together to learn and improve."



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

- Observations showed the registered manager worked hard to instil a culture of care. Staff valued and promoted people's individuality, protected their rights, and enabled them to be as independent as possible.
- Managers were visible in the service, approachable, and took a genuine interest in what people, staff, relatives, advocates, and other professionals had to say.
- People told us they felt empowered and had an active voice. We observed staff supporting people to make informed choices about their support needs.
- The registered manager was aware of their role in supporting people's rights and in maintaining equality standards.
- Staff said people were supported to maintain and improve their life skills. One staff member told us, "Everyone (receiving support) has a day each week where we support them around independence needs; these are tailored to their wishes and preferences, and they can access community support wherever they want."

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; Continuous learning and improving care

- The registered manager understood their responsibilities to be open and transparent and had had robust processes in place for receiving feedback and suggestions on how to improve the quality of support.
- Staff and managers apologised to people, and those important to them, when things went wrong.
- The registered manager had clear plans for the future of the service and used lessons learned to inform service improvement decisions.
- The provider invested in staff, embraced change, and updated processes in line with legislation and guidance to inform improvements to people's support.
- People told us managers were responsive to concerns and changes in need. One person said, "They are brilliant; they help me with bills and letters I don't understand and look to improve my support whenever they can."

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

- The registered manager had the skills, knowledge, and experience to perform their role. They demonstrated a clear understanding of people's needs and had good oversight of the services they

managed.

- Governance processes and auditing systems were effective and helped to keep people safe, protect people's rights and provide good quality care and support.
- Staff were clear about their roles and responsibilities and worked together to share information and review events to improve support for people.
- Staff told us they felt supported in their roles. The service had a low turnover of staff, with some working with the same people for many years. This had a positive impact on people's support and observations showed empowering relationships between staff and people receiving support.
- Relatives felt managers and staff were compassionate and respectful. One relative told us, "Staff always get in touch when things change or when decisions need to be made; my relative can struggle sometimes but staff support them to make decisions where appropriate & contact us for support when needed."

#### Working in partnership with others

- Staff worked closely with a wide range of professionals in order to make sure peoples' health and social needs were met. This included activity groups, advocacy services, employment support, diversity and equality groups, and specialist health services.
- The provider had systems in place to ensure communication with other agencies was effective and led to positive outcomes for people. The registered manager explained examples of joint working which mitigated peoples' risk and promoted their independence.
- Health professionals shared their observations from working with staff and managers. One health professional told us, "Staff and managers work well with us; they always welcome visits and ask for feedback to improve. People who receive support from the service are positive about the care and support they receive."