

# Rainbow Personnel Limited

# Chorley House

## Inspection report

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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

Chorley House provides personal care and support for up to four younger adults with mental health issues, learning disabilities or autistic spectrum disorder.

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 service is situated in a residential area of Bolton. Three people were living at the service at the time of the inspection. There were deliberately no identifying signs outside to indicate it was a care home.

### People's experience of using this service

The registered manager had informed the people living at the home of the planned inspection.

Chorley House was a fully accessible building that met people's needs. The property was a large detached property set in mature gardens and grounds.

The premises were homely and well maintained. There was an open and welcoming atmosphere on entering the premises.

Staff were very kind and caring towards people and had developed strong relationships with them. There was a friendly, respectful banter with staff and people who used the service.

There were sufficient numbers of trained staff to support people safely. Recruitment processes were robust and helped to ensure staff were appropriate to work with vulnerable people.

Staff had completed training in safeguarding children and adults and knew how to raise concerns.

Staff received the training and support they needed to carry out their roles effectively. Staff received regular supervisions with the registered manager.

People needs were thoroughly assessed prior to being offered a place at Chorley House. People and their relative, where appropriate had been involved in the care planning process.

The service was good at helping people achieve positive outcomes, building people's confidence, independence and helping people develop new life skills.

There was a wide and varied range of activities available to people. People had been supported to develop new interests and hobbies and opportunities for further education and volunteer work.

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 open, inclusive and supportive nature of the service meant that promoting equality and diversity and respecting people's human rights ran through every aspect of the service.

Rating at last inspection

This service was registered with us on 17 August 2018 and this is the first inspection.

Why we inspected

This was a planned inspection based on our inspection programme. We reviewed the information we held about the service. No areas of concern were identified.

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.

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

## 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.

# Chorley House

## 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

Chorley House is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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. 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 registered manager would be at the home to support the inspection.

#### What we did before the inspection

We reviewed information we had received about the service. 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 this information to plan our inspection.

#### During the inspection

We spoke with all three people living at the home. We spoke with two members of staff and the registered

manager.

We reviewed a range of records, this included one person's care records and associated documentation. We looked at two staff files in relation to recruitment, supervision records and training. We looked at several records relating to the management of the service and a variety of policies and procedures.

# Is the service safe?

## Our findings

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

This was the first inspection of this newly registered service. This key question was rated as good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People living at the home told us they were happy and safe.
- Policies and procedures as well as staff training were provided to help to protect people from abuse or poor practices. Staff knew how to identify and report any safeguarding concerns.
- We were not aware of any issues regarding the safety of the people living at the home. No concerns had been raised by the local authority.

Assessing risk, safety monitoring and management

- Staff were skilled in working with people in identifying risks. Known risks and newly emerging risks to people had been comprehensively assessed and actions were in place to reduce the identified risks. Where the risk was linked to an activity that would promote new experiences and promote independence a risk management plan was in place.
- Records were kept of accidents and incidents. These were kept under review to check appropriate action had been taken and if any trends or patterns had developed, which required further intervention.
- People had personal emergency evacuation plans (PEEPs). PEEPs informs the emergency services about the assistance people required to ensure their safety.
- Environmental audits were carried out to check the premises and equipment were safe to use. Records showed regular internal checks as well as external servicing were undertaken regarding fire safety, gas and electric supplies.

Staffing and recruitment

- Sufficient numbers of staff were available. Staffing levels were flexible and planned by the registered manager to cover people's activities and appointments.
- The service had their own staff bank. This meant that people at the home were supported by people they knew and who knew them.
- Safe recruitment practices had been followed. This included a range of pre-employment checks and checks with the Disclosure and Barring Service; The DBS checks help employers make safer recruitment decisions about applicants' suitability to work with vulnerable people.

Using medicines safely

- People's prescribed medicines were appropriately stored. Staff responsible for the administration of medicines had completed relevant training and had their competency assessed.
- Systems to check medicines were safely managed were effective and regular checks and medication audits were completed.

- Staff had access to the home's medication policy and to best practice guidelines to refer to as required.

#### Preventing and controlling infection

- Effective infection control and cleaning practices were in place. The home was clean and fresh.
- People had access to disposable gloves and aprons for different tasks to minimise the spread of infection.

#### Learning lessons when things go wrong

- Accidents and incidents were recorded and monitored by the registered manager for any patterns or trends.
- Risk assessments were reviewed and updated following any incidents.



# 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 inspection for this newly registered service. At this inspection this key question was rated as 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

- Care records identified that people were involved in care planning.
- People's preferences, likes and dislikes were acknowledged and recorded
- People's histories and background information was also recorded.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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. In care homes, and some hospitals, this is usually through the MCA application process called the Deprivation of Liberty Safeguards (DoLS).

We checked to see the service was working with the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager monitored the application and renewal of all DoLS applications to ensure guidance was complied with.
- We saw consent had been sought regarding people's care and support and management of personal information.
- Where people, were not always able to make decisions for themselves, a best interest decision was made involving relevant people. These decisions considered the least restrictive options for the person.
- Detailed pre-admission assessments were completed to make sure people's needs could be met. Assessments contained information about people's medical, physical and emotional needs, including known risks and levels of support. Individual support plans were regularly reviewed and reflecting people's current and changing needs.

Staff support: induction, training, skills and experience

- A programme of training and support was provided to all staff. Records were maintained to monitor training had been completed and this was up to date.
- Staff spoken with confirmed they had completed an induction programme and all essential training on commencing work at the service. Specialist training was provided when required.

- Staff were seen to be competent, knowledgeable and skilled in their role and supported people effectively.
- Staff confirmed they enjoyed working at the service. One said, "It's lovely working here, it's a calm and relaxing atmosphere."

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

- On admission to the service a risk assessment was completed to look into people's weight, eating and drinking habits and their physical health.
- Records were kept regarding people's daily food and fluid intake. These were monitored and any concerns regarding people's dietary and fluid intake would be referred to the GP and/or other relevant healthcare professionals.
- The registered manager and staff planned meals with people, who were including in the buying of the food and in the preparation of meals. Where possible people living at the service enjoyed an evening meal together. There was also weekly take away night planned.
- Staff had completed training in food hygiene. The home had recently been inspected by the Food Standard Agency (FSA) and had achieved a five-star rating, which is the highest rating.

Staff working with other agencies to provide consistent, effective, timely care

- People were supported when moving between services. The registered manager told us that following a pre-admission assessment people were invited to the service to look around the home and meet other people living at the home and staff. This slowly built up to staying for meals and a week's trial period to ensure the home was the right choice for them.
- People's care and support was planned, and records showed a multi-disciplinary approach was taken when moving people in to the home. This meant that people concerned with placing a person at the home worked together, acting in the persons best interest.

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

- People were provided with a clean, warm and well-maintained environment. Aids and adaptations were provided to keep people safe.
- Bedrooms were personalised with people's own belongings. One person spoken with told us how much they liked their room.
- People has access to bathing facilities on both floors and near to their bedrooms.

Supporting people to live healthier lives, access healthcare services and support

- People had access to a range of medical and healthcare services including registering with a local GP and dental services.
- Guidance from professionals was included in people's care records and help inform both risks assessments and care planning.

# 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 was the first inspection for this newly registered service. This key question was rated as good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people were well treated and supported; respecting equality and diversity.

- It was evident that people living at the home had built up good relationships with staff. There was a friendly, respectful rapport between staff and people living at the home.
- Staff spoke with pride about the people they supported and were proud of the goals achieved by them. Staff were motivated to provide care that was kind and compassionate.
- The open, inclusive and supportive nature of the home meant that promoting equality and diversity ran through every aspect of the service delivery. This meant that staff were well placed to support people from a different backgrounds, sexuality and faiths. Staff had completed training in equality and diversity.

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

- People's wishes, and feelings were sought when planning their care and support. Further opportunities were provided through care reviews and resident meetings.
- Where possible, people were able to make day to day decisions for themselves. This included any activities they would do, attending college and helping with local volunteer groups. Staff supported people with these visits. People were allocated a key worker; however, all staff were involved with supporting people. This meant that if a person's key worker was on annual leave or off sick other members of staff could provide continuity of care.
- People living at the home accepted house rules, for example the no smoking policy and the cut off point for going outside to smoke at night. This was for their safety and staff safety.

Respecting and promoting people's privacy, dignity and independence

- People appreciated the staff role in helping them to remain independent. This included supporting them with daily living tasks and some elements of personal care.
- Staff respected people's privacy and dignity and ensured they knocked on people's bedroom doors and waited for a response before entering the room.
- People's information was securely stored to protect people's rights to privacy and confidentiality.
- People's rights to a family life were respected. Staff supported people, where appropriate with family visits and contact.

# Is the service responsive?

## Our findings

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

This was the first inspection of this newly registered service. This key question was rated as 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

- People received care and support based on their individual needs, wishes and preferences. Information gathered as part of the pre- admission assessment, which involved speaking with others involved with the persons care had been used to create a detailed care plan.
- From our observations we found that staff knew people well and delivered care in line with people's wishes.

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.

- People's communication needs were assessed, recorded and met. Records showed that people had given their consent for records to be shared with other parties where necessary.
- We noted that some information was in a pictorial format or easy read format to assist people with reading and understanding the information if required.

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

- People were supported to engage in activities and in the local community. Staff were required to support people to access the local community, for example, visits to supermarkets and trips out. We were told about a recent trip to Blackpool which people said they really enjoyed and that they were looking forward to the next trip.
- People were assisted with volunteer work and were actively involved in a woman's group.
- People were supported to attend college course to continue with or learn skills. On the day of our visit one person had enrolled at college and excited about this new venture.

Improving care quality in response to complaints or concerns

- People told us they were happy with the care provided, no concerns were raised.
- Systems were in place to record and respond to any complaints in line with the home's procedure.

End of life care and support

- People living at the home were all younger adults. No one was receiving end of life care at the time of the inspection. Any discussions around this topic would be suitably addressed by the registered manager,

families and other relevant professionals.

# 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 was the first inspection since the service was registered in August 2018. At this inspection this key question was rated as good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The service had a registered manager in post. The registered manager understood their duty to report any issues that affected the service, for example safeguarding concerns or serious accidents and incidents to the CQC.
- The registered manager and staff had clearly defined roles and responsibilities. The team worked well together and effective systems were in place to help keep them informed of people's current and changing needs, so the timely and effective support was provided.
- Staff were complimentary about the registered manager. They told us the home was well managed and the registered manager was supportive and approachable.
- The registered manager maintained oversight of the quality and safety of the service by completing a range of checks and auditing.

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 had a visible presence in the service and led by example.
- The service had a clear, positive and open atmosphere that was shared by the registered manager and the team. Staff provided a high quality of personalised care to the young people they supported.
- The registered manager was clear about the role of the Duty of Candour in improving the sharing of information and learning.

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

- The atmosphere and culture within the home was positive. Staff worked hard to strive to provide best outcomes for the young people at the home.
- The service supported some people living with a learning disability. Care and support provided had been in line with the values that underpin Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion.
- Staff meetings were held as well as residents meetings. The residents meeting was chaired by a person living at the home.

Working in partnership with others

- The service worked closely with other services so that people's; assessed needs were appropriately met, and their health and wellbeing was maintained.
- Links had been developed within the wider community to help promote people's community presence as well as maintain their independence.