

The Brothers of Charity Services

# The Brothers of Charity Services - Greater Manchester Services

## 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

The Brothers of Charity Services – Greater Manchester Services provides support to people living in their own homes who need additional support due to learning difficulties, physical disability, mental health needs, drug and alcohol addiction and hoarding. The service currently supports 65 people in the Bury, Rochdale and Stockport areas. Of those only 21 people receive the regulated activity of personal care.

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.

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

The service continued to maintain safe and effective systems with regards to staff training and development and recruitment procedures, medication management, infection control, safeguarding and complaints.

Since the last inspection there had been a high turnover in staff. All vacancies had been recruited to and the team was now more stable. Staff told us changes in the management structure had been positive and the running of the service was now better organised and inclusive.

Regular audits and checks were completed to monitor and review all areas of the service. People, their relatives and staff were able to share their ideas and views about the service and support provided. Information and comments received were reviewed to explore any themes or patterns so improvements could be made.

People spoke positively about their experiences and enjoyed a good rapport with staff who knew them well. Staff spoke sensitively and passionately about their role and clearly understood what was expected of them.

People's needs were assessed prior to joining the service. Information was used to develop their support plans and risk assessments. Information guided staff on the needs, wishes and preferences of people enabling people to remain as independent as possible.

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. Where people needed help to make decisions advocacy support was available.

Lots of information and opportunities were made available to encourage people to meet with others,

develop relationships as well as take part in activities promoting community presence.

People were supported in a range of areas to meet their individual needs. This included encouraging people to continually develop their independent living skills, such as budgeting, shopping, cooking and housekeeping.

People had access to a range of health care support where needed and were offered advice and support on maintaining their health and well-being.

Suitable arrangements were in place for the recording and responding to any safeguarding issues or complaints and concerns.

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 April 2017).

#### Why we inspected

This was a planned inspection based on the previous 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 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.

# The Brothers of Charity Services - Greater Manchester Services

## **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 team comprised of one inspector.

### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in home.

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 provider or registered manager would be in the office to support the inspection.

Inspection activity started on the 30 September 2019 and ended on the 1 October 2019. On the first day we visited the office location. On the second day we visited people living in their own homes as well as meet with staff.

#### What we did before the inspection

We reviewed information we had received about the service since registering with the CQC. We sought feedback from the local authority involved with the service and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. No issues or concerns were raised with us.

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. We also reviewed information we held about the service, including notifications the provider had sent us. A notification is information about important events which the provider is required to send us by law. This information helps support our inspections.

#### During the inspection

We visited four people in their own homes and the relative of one person to seek their views about the care and support provided. We also contacted one person by telephone. We spoke to six members of the staff team including the registered manager, co-ordinator, a team leader, office manager and support workers.

We reviewed a range of records, including medication administration records (MAR's), care records staff personnel files, training records as well as information relating to the health and safety and management and oversight of the service.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found.

# 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 as good. At this inspection this key question has now remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People continue to be supported in a safe and effective way. Those people we spoke with told us, "I feel safe, I trust the staff" and "They look after me great." One person's relative said, "[Relatives name] feels comfortable and safe with all the carers."
- Staff spoken with understood their responsibilities in reporting any concerns around the safety and protection of people. Staff confirmed and records showed training was provided as well as guidance on the safeguarding and whistle blowing procedures. One staff commented, "I would report anything, they [manager] would always help and sort things out."
- Prior to the inspection we had been made aware of an incident. This had been reported appropriately to the local authority and CQC. We were told an internal investigation had been concluded and any lessons learnt would be shared with the team.
- Procedures were in place where staff had access to people's homes or assisted with finances. The management of people's house key were handled using key safes. Numbers were kept confidential so that only those requiring entry to people's property had access to them. Records and receipts were maintained for all financial transactions. We noted records for one person did not correspond. This was raised with the registered manager. Immediately following the inspection an audit was completed, no issues were identified. The registered manager also met with staff to reinforce the procedure and practice to follow.
- Whilst staff did not wear a uniform they were issued with a photographic identity badge. These help to prevent unauthorised people from entering their homes.

Assessing risk, safety monitoring and management

- Safe systems had been maintained to help minimise and manage areas of risk.
- Environmental, health and safety and fire safety risk assessments were carried out prior to staff working in people's homes. These explored all areas, such as; carpets, furnishings, equipment, working space, smoke alarms and cleaning products. These assessments helped to address potential hazards providing a safe working environment.
- Individual risk assessments had also been developed in specific areas of support, such as eating and drinking, bathing, mobilising, medication and decision making. These assessments guided staff on the actions to take to help reduce such risks.

Staffing and recruitment

- Safe recruitment processes continue to be maintained when employing new staff. A review of staff files confirmed all relevant information and checks were in place.
- People we spoke with said, "I have consistent staff which is great", "I'm very happy, all the ladies know me"

and "They do a good job, keep up the good work."

- Since the last inspection there had been a high turnover in staff. All vacancies had been recruited to and the team was now more stable. To help with staff retention the service offered incentives to staff. These included, childcare voucher scheme, voucher when referring a friend, flexible working hours, discounted gym membership, cinema tickets, dental and optical assistance as well as a counselling helpline. One staff member told us, "They look after the staff and their well-being."
- Staff told us they worked with the same group of people. One staff member who was a 'walker' said their rota had been well planned allowing time to travel to and from people's homes.

#### Using medicines safely

- People continue to receive their prescribed medicines safely. Items were held securely in people's homes and records were completed on administration.
- Policies were in place to guide staff along with training and assessments of competency to ensure practice was safe.
- We saw support plans and risk assessments were completed where staff supported people with their prescribed medicines. We noted on one file information had not been updated following a recent change in the persons medication. On a second file there was no information about the application of creams and eye drops. These issues were raised with the registered manager and addressed during the inspection.

#### Preventing and controlling infection

- Information about how people were supported in meeting their continence needs was not clearly outlined within people's individual support plans. This was raised with the registered manager. Immediate action was taken to ensure where this level of support was provided information was included in people's support plans.
- Infection prevention and control policies and procedures were in place along with staff training. Staff were aware of the importance of following safe practice.
- Personal protective clothing was readily available in office and accessible to staff.

#### Learning lessons when things go wrong

- An analysis log was maintained in relation to accidents and incidents. This included a description of the event and any lessons learnt to prevent reoccurrence. These were reviewed monthly to help identify any issues or patterns.
- Staff were confident any issues raised with management would be investigated thoroughly and action taken where things could be improved. Any learning was shared with the staff team.



# 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 the last inspection this key question was rated as good. At this inspection this key question has now remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- People we spoke with felt staff had the knowledge and skills needed to support them properly. People told us, "All the staff look after me great, they care for me" and "They do a brilliant job."
- Staff spoke positively about the training and development programme offered. Staff told us, "Certainly feel the training gives us the knowledge and prepare us with the tools needed" and "[Managers] are good at giving feedback about good practice."
- As part of the annual feedback surveys staff had been asked their views about whether the "Learning zone" being developed on the internal intranet was a good idea. Responses made were 100% positive. One person commented, "It will help those who still feel unsure and need that confidence boost by being able to still learn more about all aspects of the job."
- A review of records showed that a thorough induction process was completed in line with the care certificate. This included a period of shadowing as well as relevant training. On-going support was also provided through regular supervisions and appraisals.
- We saw a programme of training planned for 2019 and 2020 with a range of courses available on a quarterly basis so that staff were kept up to date. These included, communication & positive approach to conflict, dementia awareness, equality and diversity, rescue medication, MCA and DoLS, person centred care, risk assessments and safeguarding.
- Staff were also offered vocational training in health and social care, with additional management courses for senior members of the team.

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

- One person we spoke with confirmed staff helped them to shop and prepare meal of their choosing. Adding, "They take me to the supermarket, I like picking what I want."
- Staff helped people to maintain a balanced diet in line with their assessed needs. We saw support plans included information about any nutrition and hydration support and people's likes and dislikes were recorded.
- The service promoted the need for people to have good health and nutrition and had been involved with the Bury Lifestyle Campaign 'I will if you will'. This provided information and advice to help promote people's health and well-being.

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

- We were told that relevant equipment was always provided to help promote people's independence as

well as keep them safe. Two people we spoke with said, "They know how to use things [equipment], they've been shown" and "I feel safe with them when they are hoisting me."

- The service worked closely with relevant agencies so people received the health support needed. These included, social workers, drug and alcohol teams, psychiatrists and GPs. One person we spoke with said that staff assisted them to appointments when needed.
- There was lots of information for people about health care support and well-being initiatives available in the area .

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; 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 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 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.

- An initial assessment was completed when people were referred to the service to help establish if they were able to provide the care and support people wanted and needed.
- On commencement of their support people were provided with a Welcome Pack and Consent Agreement. This was an easy read support agreement (contract) which referred to the Human Rights Act as well as seeking people's consent.
- Records showed that people had been involved and consulted with about their care and support. People told us, "I make the decisions" and "They always listen to what I have to say."
- Staff understood the importance of gaining consent from people prior to completing tasks and spoke about how they offered people choice and control. Adding, "They are the decision makers" and "We have to respect people's decisions."
- We found the registered provider continued to work within the principles of the MCA so that people's rights were protected. Staff confirmed, and records showed that training in the MCA was provided. One staff member had also completed a 'train the trainer' course in MCA and DoLS, which enabled them to facilitate training and offer advice to the team.
- We were told physical intervention was not required by anyone using the service. However, if necessary the registered manager said relevant authorisation would be sought and comprehensive training would be provided, so that people's rights were upheld and protected.

# 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 the last inspection this key question was rated as good. At this inspection this key question has now remained the same. 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 told us staff treated them in a kind and compassionate way and were sensitive to their needs. They told us, "They [staff] care for clients, go over and beyond", "We share ideas and communicate well together", "They are always cheery and we have a laugh" and "I enjoy them visiting."
- The service provided training and information for staff in relation to areas of 'equality and diversity'. Staff spoke about treating people as individuals and being 'non-judgemental'.
- Areas of equality and diversity were explored when agreeing people's support plans.

Consideration was given to people's cultural and spiritual needs and relationships and sexuality.

- Advocacy staff employed by the service had provided training and support to people on 'Why be safe' and 'How to date and be safe'. Easy read guides were also available to help inform people and keep them safe.
- Recent comments had been received from people's relatives in the feedback surveys distributed by the service. People's family members expressed their satisfaction about the staff who visited their relatives. Comments included; "All the staff deserve praise, we could not manage without them", "They are all hard working, lovely caring ladies and they look after [relatives name] and myself with lots of love and care", "All the carers are great" and "They are all good people."

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

- People and their relatives said their views were considered about the delivery of care. One person told us, "They have adapted to my situation, we discuss it together", "We openly discuss everything" and "Staff are competent, they listen to my requirements."
- A 'Welcome Pack' was made available to people when joining the service. This provided good information for people about what they could expect from the service and how they would be involved. Including details about support planning, advocacy support, positive risk taking as well as funeral planning.

Respecting and promoting people's privacy, dignity and independence

- People we spoke with felt that staff considered their privacy and provided care in a discreet and dignified manner. One person told us, "They are careful and considerate when providing care, very good, very respectful."
- Further comments had been provided by people's relatives in the surveys about how staff afforded dignity and respect towards their family member. Comments included, "Very caring", "Carers are helpful and compassionate", "Staff are excellent, couldn't be better" and "Brilliant."
- Where needed aids and adaptations were provided enabling maintain some independence. As well as help people keep them safe.

- Staff spoke about people in a respectful and sensitive manner and gave good examples of how they helped people to maintain their independence by encouraging them to take part in their care, and to do what they could themselves. One staff member said, "There's a really good team, caring and genuine people which shows in the work they do. They are proactive and share ideas and experiences."

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has now remained the same. 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

- A review of records showed that a thorough assessment was completed for each person. Information was used to develop an individual support plan. These provided detailed information to guide staff about the specific individual needs of people, their interests, wishes and preferences. Plans also explored social inclusion and being part of their community. One staff member said, "Individual wishes and preferences are always considered, there's an emphasis on people choices."
- We saw people who used the service were fully involved with planning and reviewing their care and support. Records showed that both face to face and telephone reviews were carried out. Following recent reviews two people had commented, "I'm very safe", "First class, they treat me like a lady", "Oh its lovely and brilliant, for me it can't get any better" "I will always ring and tell you if I need anything at all, you do a good job."
- Staff spoken with said they were always kept informed of people's changing needs so that consistent care could be provided. We were told, "Communication is good and we're kept informed."

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

- The service employs a Regional Advocacy and Community Engagement Co-ordinator. As part of their role they facilitate coffee mornings providing people with an opportunity to seek advice as well as meet with others who use the service.
- We saw lots of opportunities were provided to support and encourage people in taking part in events as well as developing friendships helping to promote their independence, increase community presence as well as reduce social isolation. These had included, walk in Nuttall Park and Ashworth Valley, artwork, photography, film nights, trip to Blackpool and Communi-tree, a group which reconnects with nature offering activities such as cooking on open fires, flower arranging and making wooden jewellery
- The service also had a 'well-being' planner, which included leisure pursuits within the borough including swimming, gym, exercise classes and cycling.
- Further new letters were available to people and staff offering information about how to meet people's emotional and spiritual needs through groups and services available within the community. These included; local church groups, adult learning courses as well as LGBT, mental health and addiction groups.

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.

- We were told no one currently using the service communicated using different methods, for example, sign language. However, should this be required support from across the organisation and staff training would be provided.
- During the assessment process people's communication methods and level of understanding were explored. Documentation was made available to people in easy read formats, such as large print and pictorial. This helped them to understand the information made available to them.

Improving care quality in response to complaints or concerns

- Information about how people can raise complaints or concerns and compliments was outlined in the 'Welcome pack' people received. This provided an easy read guide about the process and who people can contact.
- People and their relatives felt confident in raising any comments or concerns with any of the staff members known to them. One person told us, "I know the chain of command, I can talk to any of them." Another person added, "I would let them know if there were any problems."
- The registered manager maintained a system for reporting, investigating and responding to any issues or concerns brought to their attention. A record was also maintained of any 'niggles' raised with the management team. This demonstrated people's comments were listened and responded to appropriately.

End of life care and support

- We were not made aware of anyone being cared for at the end of their life. Where this support may be required the service would liaise with relevant healthcare professionals to ensure people received the care and support they needed.

# 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 as good. At this inspection this key question has now 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; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The culture of the service focused on delivering person-centred care that met people's individual needs. People we spoke said, "All the staff are caring, professionally trained and you get a good response", "Very confident in them, find them very professional" and "It's a great service, I would recommend them,"
- The service had a manager registered with the Care Quality Commission (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.
- Managers and staff had clearly defined roles and responsibilities. Staff told us changes in the management structure had been positive and the running of the service was now better organised and inclusive.
- Staff spoke positively about the attitude of managers and office staff. They told us, "[Registered manager] is responsive and appreciative, he's down to earth and respectful", "The office staff are excellent, they keep things going and have a good relationship with people", "[Managers names], 10 out of 10, they are brilliant" and "The changes have been very positive and for the right reasons, you know who does what now."
- The service is open during normal office hours. People and staff were provided with an 'on-call' number which was available outside of these hours for advice or unforeseen emergencies.

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

- Providers of health and social care services are required to inform the CQC, of important events which happen in their services. The registered manager and provider had informed CQC of significant events, where necessary and understood their responsibilities.
- The service had a Statement of Purpose and Welcome pack which clearly outlined what people could expect from the service.
- The rating from the previous inspection was displayed in the office and on the registered providers website.

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

- Annual feedback surveys were distributed to people who used the service, their relatives and staff. We were told a new 'service user survey' had been developed titled 'Let us know'. This was provided in a pictorial easy read format and was to be distributed October 2019.

- Feedback survey responses had recently been received from people's relatives. Overall the response was very positive about their experiences and the quality of care provided for their family member.
- In June 2019 staff had also completed a 'health and well-being' survey. Results had been collated and showed staff felt the service positively supported them in relation to their health and well-being, that individual stress risk assessments were a positive initiative and the service supported a work life balance. Some of the comments received included, "If I have any issues or needs I would be able to discuss with my line manager", "The look at the individual issues and not a generic approach" and "It [work life balance] ensures staff feel valued and supported and helps to limit unnecessary work-related stress issues"
- Other opportunities were provided to engage with people through the training offered to them as well as the informal support available at the coffee mornings and film nights.
- Staff and management meetings were held providing opportunity for information sharing as well as enabling staff to share their views and ideas.

#### Continuous learning and improving care

- Systems continued to be in place to monitor the quality of the service. Checks were completed by the management team as well as the internal compliance team. This helped to ensure all areas of the service were monitored and reviewed. Action plans were implemented where areas of improvement had been identified.
- The organisational management team met on a regular basis so that information and learning could be shared across the organisation. This helped to promote a consistent approach across all services so that people experience good standards of support.
- In 2018 the service again achieved the Gold Standard Investor in People award. This explored indicators of success such as leading and inspiring, empowering and involving people, managing performance, delivering continuous improvement and creating sustainable success.

#### 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 well-being was maintained.
- The service offered learning opportunities for social work students from a local university. Qualified staff within the organisation mentored and supported students throughout their placements.