We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

St Bonaventures

62 Kenworthy Lane, Northenden, Manchester, M22 4EJ  
Tel: 01619456265

Date of Inspection: 18 July 2013

Date of Publication: August 2013

We inspected the following standards as part of a routine inspection. This is what we found:

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<td>Met this standard</td>
</tr>
<tr>
<td>Safety and suitability of premises</td>
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<td>Complaints</td>
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## Details about this location

<table>
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<tr>
<th>Registered Provider</th>
<th>St Bonaventures Trust</th>
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<tbody>
<tr>
<td>Registered Manager</td>
<td>Mrs. Jenny Louise Ryan</td>
</tr>
<tr>
<td>Overview of the service</td>
<td>St Bonaventures is a residential care home providing care and support for a maximum of seven adults with a learning disability. The home is situated in the Northenden area of Manchester, within easy reach of shops and community amenities.</td>
</tr>
<tr>
<td>Type of service</td>
<td>Care home service without nursing</td>
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<td>Regulated activity</td>
<td>Accommodation for persons who require nursing or personal care</td>
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When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.

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Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 18 July 2013, observed how people were being cared for and talked with people who use the service. We talked with staff and talked with commissioners of services.

What people told us and what we found

People using the service told us that staff encouraged them make their own choices in their daily lives. People living at the home told us that the staff looked after them well. Comments made included:

"The staff are very nice and kind."

"I am very happy here."

"I like it here."

They also told us about all the different outings and events (including regular holiday breaks) they were enabled to participate in.

We found that people were being cared for in a suitable environment by adequate numbers of appropriately trained staff. A suitable system was in place to deal with people's comments and complaints.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.
Our judgements for each standard inspected

Consent to care and treatment

Before people are given any examination, care, treatment or support, they should be asked if they agree to it

Our judgement

The provider was meeting this standard.

Before people received any care or treatment they were asked for their consent and the provider acted in accordance with their wishes. Where people did not have the capacity to consent, the provider acted in accordance with legal requirements.

Reasons for our judgement

People using the service told us that staff encouraged them make their own choices in their daily lives. We observed staff to provide such support to people throughout our visit. They also treated people respectfully and communicated with them effectively.

We spoke with all staff working at the time of our visit. They understood the importance of effective communication with people using the service and ensuring they were able to make their own decisions in their daily life (including consenting to their care and support where able to do so). Where communication was difficult staff described to us how they used pictures and photographs to enable people using the service to understand and establish their wishes. Training records recorded that staff had been provided with training in respect of The Mental Capacity Act and Deprivation of Liberty Safeguarding (DOLS). Staff had also been provided with training related to person centred care which included the importance of making choices, treating people with respect, maintaining their dignity and ensuring their human rights.

Care records we looked at were highly personalised and demonstrated that people were consulted about the care and support they needed. Where possible they were involved in making decisions about their care and support.

Where people using the service did not have capacity to make their own decisions best interest meetings were held with people who understood the person using the service. We saw evidence of such meetings being held in respect of two people. Decisions made at such meetings were subject to review to ensure the decisions were still valid and relevant. This is important to protect the rights of the individual and ensure their care, treatment and support needs are being safely and appropriately met.
Care and welfare of people who use services  

Met this standard

People should get safe and appropriate care that meets their needs and supports their rights

Our judgement

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

Reasons for our judgement

People living at the home told us that the staff looked after them well. Comments made included;  
"The staff are very nice and kind."

"I am very happy here."

"I like it here."

They also told us about all the different outings and events (including regular holiday breaks) they were enabled to participate in.

People living at St Bonaventures were being supported to access treatment and care from a wide range of community health services as their health needs required. All people resident at the home were registered with a local GP and had an up to date personal health care plan in place. We looked at the care records of three people using the service. They contained risk assessments and care plans to safely address their care and support needs. Care records were highly personalised to the individual person. They reflected people's personal preferences in their daily life and demonstrated that they (and their relatives if appropriate) were involved in the planning and review of the care and support provided. The care records we looked at had been reviewed regularly. This ensured any changes in people's needs were identified early and responded to appropriately.

We observed staff to support and care for people appropriately and sensitively during our visit. They communicated with them appropriately, respected their wishes and encouraged them to make choices and maintain their independence.

We talked with all the staff working at the time of our visit. They were very aware about the care and support needs of people using the service and their role in providing that care and support.

We also spoke with a contracts officer from Manchester Social Services contracts team. They told us they had not raised any concerns regarding the quality of the care and support provided to people at St Bonaventures since the last inspection in November.
Safety and suitability of premises  

People should be cared for in safe and accessible surroundings that support their health and welfare

Our judgement

The provider was meeting this standard.

People who use the service, staff and visitors were protected against the risks of unsafe or unsuitable premises.

Reasons for our judgement

At the time of our unannounced visit St Bonaventures was clean and free of any unpleasant smells. People we talked with told us they were very happy with their own room and the communal areas in the home. One person said "I love it here, this is my home." Another told us "I have my own room and everything I need in it."

We looked at four people's bedrooms during our visit. These were clean, warm, comfortably furnished and suitably decorated. All were highly personalised by the person using the service. Lounge and dining areas were provided. These areas were clean, warm and suitably furnished. They were accessible to all people using the service. A wide range of leisure equipment was provided including televisions, music centres, DVD's, craft materials and board games and books. This provision supplemented the support provided people using the service to access social and recreational activities in the local community.

Toilet and bathing/shower areas were clean and appropriately equipped. Regular checks were made (and recorded) to ensure hot water temperatures did not pose a risk to people using the service and others. Suitable arrangements were in place to minimise the potential spread of infections. These arrangements included suitable provision for hand washing, cleaning and laundering clothing and linen.

A spacious and accessible private garden is situated to the rear of the home. This area was well maintained and contained garden furniture. People using the service were enabled to participate in growing flowers and vegetables and a green - house had recently been purchased to expand this activity.

We looked at the arrangements to ensure the safety of electrical, gas, heating and other facilities within the home. We looked at records of servicing/inspection relating to those facilities. These demonstrated that regular checks were being conducted to minimise risk to people using the service and others. We also looked at the arrangements to respond to and minimise the risk of fire in the home. We looked at records that demonstrated fire alarm systems and fire safety equipment were regularly checked/serviced.
## Staffing

| There should be enough members of staff to keep people safe and meet their health and welfare needs |

### Our judgement

The provider was meeting this standard.

There were enough qualified, skilled and experienced staff to meet people's needs.

### Reasons for our judgement

The staff team at St Bonaventures was led by the registered manager. Other members of the staff team included the deputy manager and care support staff.

The home provided enough skilled and experienced staff to meet people's needs. The personal care and support needs of people were being met by a team of care support staff at all times. The registered manager was in charge of the home at the time of our visit. They told us that staffing levels were regularly reviewed to ensure people's needs were being met appropriately. We looked at the staffing rotas for the six weeks prior to our visit. Staffing levels appeared to be consistent and appropriate for that period. We discussed the issue of night staff provision with the manager. This consisted of (as it historically has) of one member of staff who does a 'sleep in' (with two other staff being on call). Discussion with the registered manager and all the staff working at the time of our visit indicated that the assessed needs of people using the service continued to be met safely at night.

The provider had suitable management structures, systems and clear human resources procedures in place to monitor, review and maintain suitable staffing levels. This included suitable arrangements to respond to unexpected changing circumstances in the home, for example to cover sickness, absences and emergencies.

We spoke with all members of staff working at the time of our visit. They told us that they were appropriately supported by the registered manager and that their views were regularly sought and valued. We looked at documentary evidence that demonstrated staff were provided with regular formal supervision. Staff told us that they were enabled and encouraged to access appropriate training on a regular basis. Inspection of training records confirmed that this was the case. This ensured that staff were being provided with the skills required to support people using the service safely and effectively.
Complaints

People should have their complaints listened to and acted on properly

Our judgement

The provider was meeting this standard.

There was an effective complaints system available. Comments and complaints people made were responded to appropriately.

Reasons for our judgement

A suitable system was in place to deal with people's comments and complaints. A complaints record log was kept. There had been no complaints registered since the last inspection in November 2012. The complaints policy of the provider detailed that any complaint would be recorded, that it would be investigated and that the complainant would be informed of the outcome.

The complaints procedure had been also made available in easy read and pictorial format for the benefit of people using the service.

We also saw a number of thank you cards from people's relatives and a social care professional complementing the registered manager and her staff.

No complaints have been received by the Care Quality Commission about St Bonaventures.

We also spoke with a contracts officer from Manchester Social Services contracts team. They told us they had not received any complaints about St Bonaventures.
About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.
How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

💵 Met this standard

This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

❌ Action needed

This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

❌ Enforcement action taken

If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.
How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

**Minor impact** - people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

**Moderate impact** - people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

**Major impact** - people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.
## Glossary of terms we use in this report

### Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

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<td>Care and welfare of people who use services</td>
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<td>Meeting Nutritional Needs</td>
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<td>Records</td>
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### Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.
(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term ‘provider’ means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a ‘service’.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.