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

Creative Support - Manchester Extra Care Services

Hibiscus Court, 16 Sedgeborough Road, Manchester, M16 7HU
Tel: 01612265232

Date of Inspection: 23 January 2014
Date of Publication: March 2014

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

- Care and welfare of people who use services  ✔ Met this standard
- Cooperating with other providers  ✔ Met this standard
- Safeguarding people who use services from abuse  ✔ Met this standard
- Supporting workers  ✔ Met this standard
- Complaints  ✔ Met this standard
## Details about this location

<table>
<thead>
<tr>
<th>Registered Provider</th>
<th>Creative Support Limited</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered Manager</td>
<td>Mrs. Iyabode Adeleke</td>
</tr>
<tr>
<td>Overview of the service</td>
<td>Creative Support - Manchester Extra Care Services is registered to provide personal care to adults at two extra care housing schemes in the Manchester area, Hibiscus Court in Whalley Range and Shore Green in Wythenshawe, Manchester. The service operates 24 hours a day, seven days a week and supports people to live independently in their homes within each housing scheme.</td>
</tr>
<tr>
<td>Type of services</td>
<td>Domiciliary care service</td>
</tr>
<tr>
<td></td>
<td>Extra Care housing services</td>
</tr>
<tr>
<td></td>
<td>Supported living service</td>
</tr>
<tr>
<td>Regulated activity</td>
<td>Personal care</td>
</tr>
<tr>
<td>Contents</td>
<td></td>
</tr>
</tbody>
</table>

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'.

<table>
<thead>
<tr>
<th>Summary of this inspection:</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Why we carried out this inspection</td>
<td>4</td>
</tr>
<tr>
<td>How we carried out this inspection</td>
<td>4</td>
</tr>
<tr>
<td>What people told us and what we found</td>
<td>4</td>
</tr>
<tr>
<td>More information about the provider</td>
<td>4</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Our judgements for each standard inspected:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Care and welfare of people who use services</td>
<td>6</td>
</tr>
<tr>
<td>Cooperating with other providers</td>
<td>8</td>
</tr>
<tr>
<td>Safeguarding people who use services from abuse</td>
<td>9</td>
</tr>
<tr>
<td>Supporting workers</td>
<td>10</td>
</tr>
<tr>
<td>Complaints</td>
<td>11</td>
</tr>
</tbody>
</table>

| About CQC Inspections | 12 |
| How we define our judgements | 13 |
| Glossary of terms we use in this report | 15 |
| Contact us | 17 |
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 announced 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 23 January 2014, observed how people were being cared for and checked how people were cared for at each stage of their treatment and care. We talked with people who use the service, talked with staff, reviewed information given to us by the provider and talked with commissioners of services.

What people told us and what we found

Creative Support - Manchester Extra Care Services provided personal care to tenants at two extra care housing schemes in the Manchester area, Hibiscus Court and Shore Green. During our inspection we visited Hibiscus Court as this was the registered office address. Therefore our findings reported were in respect of the service provided to people who lived at Hibiscus court.

People were happy with the care provided by Creative Support – Manchester Extra Care Services. One person told us: "I have no complaints. I'm very satisfied with the service I get." One other person said: "I've no complaints. The staff are very good."

We found that people had their needs assessed before they received a service and staff were given plenty of information about people and their preferred way of having their care needs met.

We found that the registered manager worked well with commissioner and other partner agencies and this ensured that people who used the service had their needs met.

We found that staff were trained and supervised in their day to day work and because of this people who used the service received safe and appropriate care.

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

| 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's needs were assessed and care and treatment was planned and delivered in line with their individual care plan.

Reasons for our judgement

People told us they were satisfied with the care they received from Creative Support - Manchester Extra Care Services.

Hibiscus Court provided 37 self-contained one bedroomed flats. Creative Support - Manchester Extra Care Services provided 24 hour care including waking night support to approximately 15 tenants who lived at the extra care housing scheme.

We found that prior to someone being offered a flat at the scheme an assessment of their housing and care needs was undertaken and then discussed at a monthly panel meeting with the commissioners of the service. We were told a number of issues were considered at the panel meeting, for example, a person's suitability for the scheme, a balance of their care and support needs alongside other tenants, and any health and safety considerations including fire safety.

We looked at the care records of three people who used the service. Records showed that people's needs were assessed before they received a service. We saw that assessments were completed prior to a service being provided and these included information and assessments from professionals involved with people, for example, care managers and social workers. This meant that the service had assured itself that they were able to meet a person's care and support needs prior to setting up a care package.

We looked at the care plans of people who used the service and found these were personalised and detailed and provided staff with clarity about what care and support they were expected to provide to people. Care staff told us that they were given information about people before they visited them and they always read people's care plans before visiting people, so that they knew exactly how best to help and meet each person's needs. This meant that care staff had up to date information on people's care needs and how their needs were to be met.

Staff told us that they had set times when they visited people and because of this people
knew when to expect them. Staff told us that they were also able to provide a flexible service, for example, if someone wanted to go out shopping. We found that some of the people who used the service preferred to have their care needs met by a member of staff who was the same gender. We found that the service always accommodated people’s wishes in this respect. This meant that the service was mindful of people's individual needs and tried to accommodate these and provided a personalised service where possible.

We saw that care records included risks assessments, such as manual handling risk assessments. This meant that risks had been identified and actions taken to maintain the safety of people who used the service and care staff whilst working in people’s homes.

We found there were good arrangements in place to monitor and review people's ongoing care packages. This meant there were systems in place to ensure that people who used the service continued to have their care needs met.
Cooperating with other providers

Met this standard

People should get safe and coordinated care when they move between different services

Our judgement

The provider was meeting this standard.

People's health, safety and welfare was protected when more than one provider was involved in their care and treatment or when they moved between different services. This was because the provider worked in cooperation with others.

Reasons for our judgement

We wanted to know how people who used the service received safe and coordinated care, treatment and support where more than one care provider was involved in their care.

We found that the service worked collaboratively with commissioners and partnership agencies. Creative Support - Manchester Extra Care Services had been commissioned by Manchester City Council to provide personal care and support within a privately owned sheltered housing scheme.

The registered manager told us they had a good working relationship the housing scheme manager. They told us that they undertook joint assessment visits to prospective tenants of the scheme during which a person's care and support needs would be assessed. We spoke with the scheme manager who wholly endorsed what the registered manager had told us and confirmed that the joint working relationship worked well and secured good outcomes for people who used the service.

In addition to joint assessment visits to prospective tenants the registered manager attended a monthly panel meeting along with the scheme manager and commissioners from Manchester City Council. We were told that prospective tenants were discussed at these meetings and any issues or concerns regarding current tenant’s needs were also discussed. This meant that the service worked well with commissioners and partnership agencies who were involved in their care and treatment and arrangements were in place to respond to people's changing needs.
People should be protected from abuse and staff should respect their human rights

Our judgement

The provider was meeting this standard.

People who used the service were protected from the risk of abuse because the provider had taken reasonable steps to identify the possibility of abuse and prevent it from happening.

Reasons for our judgement

People who used the service told us that staff treated them well and spoke to them in a respectful manner.

We looked at the safeguarding policy for the agency, which advised staff what action to take if they had concerns or suspected a person who used the service was at risk. We saw a flow chart displayed in the office which advised staff of what procedure to follow in the event of a safeguarding incident. We saw that the service also had a handling finances policy and staff who had responsibility for finances had completed training. Staff told us that safeguarding was always discussed at team meetings and supervision meetings. This meant that information was made available to staff in respect of good safeguarding practice and this supported their practice in protecting people who used the service from abuse.

We spoke with a care coordinator and a senior carer employed by the service about their understanding of good safeguarding practice, their duty of care, and their responsibility to keep people who used the service safe. We asked them about safeguarding training and when they had last completed this training. We looked at staff training records and saw that a number of staff had completed training in safeguarding adults. We asked staff what action they would take in response to safeguarding concerns. We found that care staff were able to tell us what action they would take in response to concerns and how they would ensure people’s safety. They told us that they were confident that the registered manager would act on their concerns if they had any. This meant that staff knew how to protect people and how to respond if they had concerns about a person who used the service.
Supporting workers

Met this standard

Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Our judgement

The provider was meeting this standard.

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Reasons for our judgement

One member of staff said; "Our boss is good."
Other staff told us they felt supported by the registered manager. They told us they had been given and continued to have access to good training which supported them in their work.

We looked in detail at the training records and supervision records of four members of staff who were employed at Creative Support - Manchester Extra Care Services. We spoke with two members of staff about training and support they received. We found that staff had completed mandatory training and had access to specialist training from time to time, including diabetes care, understanding dementia and neuro linguistic programming (NLP). This meant that the registered provider had ensured that staff were fully trained to provide safe care to people who used the service.

Staff told us there were good support systems in place at the office and they felt very comfortable about calling into the office to discuss any issues they may have experienced in their work. Care staff we spoke with confirmed they received formal supervision on a regular basis and they told us that 'good informal' supervision arrangements were in place. They told us that the registered manager was very approachable they felt well supported by her. We saw records which confirmed that staff were provided with a range of supervision options including one to one meetings, observations and group meetings. This meant that staff were supported and supervised to an appropriate standard and this ensured good outcomes for people who used the service.
**Complaints**

Met this standard

**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**

People we spoke with told us they had no complaints with the service they received. One person said: "I have no complaint. I'm very satisfied with the service I get."

Another person told us: "I've no complaints. The staff are very good."

We found that the service had a complaints policy and procedure. We saw that people who used the service were given a copy of the procedure and this was kept in a service user pack in their flat, along with compliment forms and complaints forms.

The registered manager kept a record of complaints and compliments. We saw that a record was kept of each complaint and how it was resolved. This meant that the registered provider had systems in place to respond appropriately to issues and complaints raised by people who used the service.
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.

<table>
<thead>
<tr>
<th>Met this standard</th>
<th>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.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Action needed</td>
<td>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.</td>
</tr>
<tr>
<td>Enforcement action taken</td>
<td>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.</td>
</tr>
</tbody>
</table>
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:

<table>
<thead>
<tr>
<th>Standard</th>
<th>Regulation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respecting and involving people who use services - Outcome 1 (Regulation 17)</td>
<td></td>
</tr>
<tr>
<td>Consent to care and treatment - Outcome 2 (Regulation 18)</td>
<td></td>
</tr>
<tr>
<td>Care and welfare of people who use services - Outcome 4 (Regulation 9)</td>
<td></td>
</tr>
<tr>
<td>Meeting Nutritional Needs - Outcome 5 (Regulation 14)</td>
<td></td>
</tr>
<tr>
<td>Cooperating with other providers - Outcome 6 (Regulation 24)</td>
<td></td>
</tr>
<tr>
<td>Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)</td>
<td></td>
</tr>
<tr>
<td>Cleanliness and infection control - Outcome 8 (Regulation 12)</td>
<td></td>
</tr>
<tr>
<td>Management of medicines - Outcome 9 (Regulation 13)</td>
<td></td>
</tr>
<tr>
<td>Safety and suitability of premises - Outcome 10 (Regulation 15)</td>
<td></td>
</tr>
<tr>
<td>Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)</td>
<td></td>
</tr>
<tr>
<td>Requirements relating to workers - Outcome 12 (Regulation 21)</td>
<td></td>
</tr>
<tr>
<td>Staffing - Outcome 13 (Regulation 22)</td>
<td></td>
</tr>
<tr>
<td>Supporting Staff - Outcome 14 (Regulation 23)</td>
<td></td>
</tr>
<tr>
<td>Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)</td>
<td></td>
</tr>
<tr>
<td>Complaints - Outcome 17 (Regulation 19)</td>
<td></td>
</tr>
<tr>
<td>Records - Outcome 21 (Regulation 20)</td>
<td></td>
</tr>
</tbody>
</table>

**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.
### Glossary of terms we use in this report (continued)

**(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.