

# City Care Partnership Limited

## Broom Lane

### Inspection report

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### Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Outstanding 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

This was an announced inspection carried out on the 19 and 20 July 2017. We last inspected the service on 16 July 2014. At that time, the service was rated 'Good' across each of the five key questions.

Broom Lane, part of City Care Partnership, provides high quality person-centred support to people aged 18 and over living with autism and/or a learning disability. Modern purpose built accommodation and communal facilities are provided in partnership with a Registered Social Landlord.

There was a registered manager in post. A registered manager is a person who has registered with CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Broom Lane is registered with the Care Quality Commission (CQC) to provide support for up to 18 people. At the time of our inspection visit, 17 people were supported and the service had one vacancy. Located in Levenshulme, the service benefits from excellent transport links to Manchester City Centre and Stockport.

The model of support offered at Broom Lane provides a unique combination of transition services with varied supported living accommodation. Five apartments were designed for people with significant social communication issues and who cannot share space easily with others. 24 hour support is available for these people. Eight apartments are designed to support individuals who are able to manage quite independently, still require periodic support through the day, but who do not necessarily need support at night. If support is needed at night, staff are readily available. These apartments are similar in design to mainstream social housing apartments to ease people's transition into mainstream housing where it is appropriate. The shared house, comprising of two studio flats and three single occupancy bedrooms, was designed for younger people entering services.

Due to the nature of the service provided at Broom Lane we gave 24 hours' notice. This enabled the service to produce a 'social story.' Social stories are a method of sharing information using visual supports. This helped people who used the service at Broom Lane understand why we were visiting their home.

There was a truly open and welcoming atmosphere on entering the premises. The registered manager, staff and people who used the service at Broom Lane were enthusiastic about the inspection visit and were eager to share experiences. One person who used the service gave the inspection team an interesting and engaging audio visual presentation of their photographic skills.

Everyone we spoke with confirmed they considered Broom Lane to be a safe place to live. The service had an ethos of 'Manage Risk, Maximise Life.' This ethos was brought to life in the way people were supported to have as much freedom of choice in their lives as possible.

People who used the service at Broom Lane were supported by well trained and highly skilled staff. The service demonstrated industry leading best practice through continued professional accreditation with The National Autistic Society. It was strikingly apparent that the service had the right people, doing the right job at the right time. This meant the service was highly effective in responding to people's individual needs.

A comprehensive induction and training programme was in place for new staff and a framework for continuous professional development was well embedded for established staff. All new employees were required to sign-up to complete the Care Certificate. We saw how the service had adapted the Care Certificate syllabus in order to make it more relevant for supporting people living with autism and learning disabilities.

The services ethos, vision and values promoted people's rights to make choices and live fulfilled and valued lives. This was well reflected in the exceptional care and support people received from a committed, passionate and caring group of staff. Staff demonstrating kindness, patience and respect and people were given time to express themselves fully. Staff knew people well and interactions were relaxed. People who used the service spoke with great fondness and affection about the staff.

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

Broom Lane benefited from a long-serving and well established management team. The registered manager was well supported by area team leaders and benefited from the input of an experienced regional manager. At provider level, the director of health & social care maintained oversight and knew the service well.

The registered manager and the wider leadership team were inspiring and dedicated to providing support which met the highest of standards. They strived for excellence through collaboration; they were passionate and dedicated to providing an outstanding service to people. They led with a dynamic approach and continually reflected on how to improve the service further. They demonstrated a strong and supportive leadership style, seeking feedback in order to further improve what was offered. The culture of the service was open, transparent and progressive. All the staff were committed to continuous improvement of the service.

The service had renewed its commitment to the Health Charter for Social Care Providers. This is a national evidence based initiative designed to tackle health inequalities that people with learning disabilities experience. The service explored innovative ways to ensure people maintained good health. This meant people's health outcomes were greatly improved.

A flagship initiative for the service was the continued development of Yew Tree Activity Hub. This community based resource offered a comprehensive programme of activities that were suited to people who enjoyed more physical work or for those who flourished by being creative and expressive.

The provider was exceptional at developing new and innovative ways to enable people who used their network of services to access inclusive and purposeful paid and unpaid employment opportunities.

People were exceptionally well supported when transitioning between services. This included support provided before a person moved into the service and throughout their placement.

People were actively encouraged to give their views and raise concerns or complaints. There was a clear, unambiguous complaints policy and procedure that was accessible to everyone. Easy-to-read documentation was used to good effect and people's complaints were captured effectively and clear explanations given as to how the matter would be resolved.

People received support which was in line with their needs and preferences. People had a wide range of individual assessments tailored to meet the needs of people living with autism and/or a learning disability. This included comprehensive assessments and support plans centred around promoting independence. For example behaviour support, communication, sensory issues, a wide range of activities and employment opportunities.

Staff demonstrated an in-depth awareness of the principles of the Mental Capacity Act 2005 and associated Deprivation of Liberty Safeguards (DoLS) within a community setting.

Information and explanations was provided to people through the use of 'social stories'. Social stories are a method of sharing information using visual supports. These were used to excellent effect at Broom Lane, were highly person centred and utilised in a variety of innovative ways.

## 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 continues to be safe.

People we spoke with considered Broom Lane to be a safe place to live.

Staff were skilled in working with people in order to identify risk. Known and newly emerging risks had been comprehensively assessed and actions taken to reduce risks.

Medicines were administered, stored, ordered and disposed of safely with clear guidance provided.

### Is the service effective?

Outstanding 

The service was outstandingly effective.

A comprehensive induction and training programme was in place for new staff and a framework for continuous professional development was well embedded for established staff.

The service demonstrated industry leading best practice through continued professional accreditation with The National Autistic Society.

People were exceptionally well supported to maintain good health and to access a wide range of health care services.

The service had renewed its commitment to the Health Charter for Social Care Providers. This is a national evidence based initiative designed to tackle health inequalities people with learning disabilities experience.

### Is the service caring?

Outstanding 

The service was outstandingly caring.

The service's ethos, vision and values promoted people's rights to make choices and live fulfilled and valued lives. This was well reflected in the exceptional care and support people received

from a committed, passionate and caring group of staff.

Staff demonstrating kindness, patience and respect and people were given time to express themselves fully. Staff knew people well and interactions were relaxed.

Equality, diversity and human rights was at the forefront of how support was provided.

### **Is the service responsive?**

The service was outstandingly responsive.

People's support was based around their individual needs and aspirations. Staff understood individual's complex communication needs and supported them to achieve their goals and increasing independence.

The provider was exceptional at developing new and innovative ways to enable people who used their network of services to access inclusive and purposeful paid and unpaid employment opportunities.

People were exceptionally well supported when transitioning between services. This included support provided before a person moved into the service and throughout their placement.

People were actively encouraged to give their views and raise concerns or complaints. There was a clear, unambiguous complaints policy and procedure that was accessible to everyone.

**Outstanding** 

### **Is the service well-led?**

The service was outstandingly well-led.

People we spoke with told us they considered Broom Lane to have outstanding leadership.

The culture of the organisation was open, transparent and inclusive, which enabled staff to feel able to raise concerns. There was a range of methods for staff to be included in the development of the service and to express their views.

The mental and physical well-being of staff was considered a high priority. The service had recently implemented a new and innovative approach to support staff in this area.

**Outstanding** 

# Broom Lane

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This was an announced inspection carried out 19 and 20 July 2017. Due to the nature of the service, we gave 24 hours' notice. The inspection team consisted of two adult social care inspectors.

Prior to the inspection the registered provider was asked to complete a Provider Information Return (PIR). This is a form that asks the provider to give key information about the service, what the service does well and improvements they plan to make. The registered manager had fully completed this form and returned it to CQC in a timely manner.

We looked at the notifications we had received for this service and reviewed all the intelligence CQC had received. We looked at the risk level for this service. We contacted external professionals from Manchester City Council and NHS community services. We reviewed all of this information to help us make a judgement about this service.

We spoke with five people who used the service, five relatives and four external health and social care professionals. We also spoke with the registered manager, area team leader, regional manager/clinical lead, director of health & social care, speech and language therapist, assistant practitioner, team leader, five support workers and an external behavioural analyst. Feedback via email was received from the national autistic society and a relative of a person who used the service.

To help us assess how people's support was being planned and delivered we reviewed five people's support records and associated documentation.

We reviewed six staff files, three of whom were newly recruited. We looked at maintenance files and a selection of records which monitored the safety and quality of the service.

## Is the service safe?

### Our findings

Everyone we spoke with confirmed they considered Broom Lane to be a safe place to live. One person who used the service told us, "I feel very safe here. The staff check on me every morning and every night on the intercom in my flat. If I need the staff, I just press the button and they come quickly." Another person commented, "I feel really safe here I love being in my own flat." Comments from relatives included, "Our strong impression is that [relative] feels very safe in the placement." Another relative told us, "Without doubt [relative] is safe. If anything does occur, a member of staff will always get in touch. This assures me the staff never keep anything from us as a family."

We looked at the providers approach to risk management and saw the service had an ethos of 'Manage Risk, Maximise Life.' We looked in detail at people's support plans and associated risk assessments and saw how this ethos was brought to life in the way people were supported to have as much freedom of choice in their lives as possible. Staff within the service were skilled in working with people in order to identify risk. Known and newly emerging risks to people had been comprehensively assessed and actions had been taken to reduce the identified risks. For example, where a risk was linked to an activity that would promote independence or well-being, the risk was not considered a barrier and effective risk management plans would be implemented. A member of staff told us, "We all take risks every day, why should it be any different for the people we support here? I'm really confident that we do absolutely everything that we can to help people lead enjoyable lives and we thoroughly assess any potential risks and take steps to minimise risks." A relative commented, "The organisation has an impressive grasp of the autistic condition and embraces an attitude towards risk that allows people to maximise their potential whilst their safety is always held as centrally important."

Through effective risk management, we saw how one person had been supported to visit Manchester Airport in preparation for a planned trip abroad. The risk assessment was comprehensive and detailed possible triggers, risks and management strategies. This meant the person who used the service was then able to travel with their relative, enjoy the freedom and experience of independent travel and was able to meet loved ones who lived abroad.

The foundation on which support was delivered across the provider's network of services was centred on Positive Behaviour Support (PBS). The regional manager/clinical lead for PBS told us, "The system involves developing a comprehensive understanding of the behaviours displayed by an individual which may be perceived as challenging, implementing a personalised and continuing system of support and seeking to minimise the use of physical restraint." Through talking to staff and by looking at documentary evidence, we saw that PBS was being used to good effect with people who used the service at Broom Lane. Staff we spoke with demonstrated an excellent understanding of the principles around PBS. A staff member told us, "The work we do here can often be challenging and some days are really difficult. However, through PBS we really seek to truly understand the individual and the reasons behind a particular behaviour." Another member of staff told us, "Since I've joined the company, the learning I've done around PBS has been fascinating. It's really helped me to understand the people I support and more importantly, how to react to certain behaviours."



Staff were trained in CITRUS (Creative Intervention Techniques in Response to Untoward Situations). The deployment of CITRUS techniques was intended to prevent, manage, and as a last resort, restrain aggression safely. The aim was to keep people as safe as possible when acting in a physically aggressive manner. Records demonstrated that the use of any form of restraint within Broom Lane was rare but whenever restraint was used, an incident report was completed which included lessons learnt. The registered manager and other professionals within the service maintained oversight of all such incidents and pro-actively took steps to identify potential triggers and to take remedial action. Staff we spoke with demonstrated good underpinning knowledge and the appropriate use of CITRUS techniques.

We checked to see how the service sought to protect vulnerable people against abuse. We found suitable safeguarding procedures in place which were designed to protect vulnerable people from abuse and the risk of abuse. We looked at the services' safeguarding adult's policy and saw how the service managed safeguarding concerns. We found that all the staff had completed training in safeguarding vulnerable adults, which we verified by looking at training records. All the staff spoken with told us that they had received appropriate safeguarding training, had an understanding of abuse and were able to describe the action they would take if they witnessed or suspected any abusive or neglectful practice.

The service had a whistleblowing policy which gave clear guidance on how to raise a concern. Staff told us they were confident in raising concerns and felt confident these would be taken seriously and acted upon.

Accidents and incidents were comprehensively recorded and included a post-incident debriefing session with those staff who were involved. This enabled the service to develop preventive strategies to reduce the likelihood of such events occurring in the future.

Medicines were stored, administered, recorded and disposed of safely. This included a sample signature list of staff responsible for administering medicines being available. A photograph of each person who used the service receiving medication was displayed on their file to reduce the risk of medication errors. Staff were trained in the safe administration of medicines and kept relevant records that were accurate.

We reviewed recruitment procedures and found robust and safe recruitment practices continued to be in place. The selection process consisted of application, interview, role-play scenarios, shadowing experienced staff along with people who used the service, and a final six month performance review. This was further evidenced through our examination of employment application forms, job descriptions, proof of identity, written references and Disclosure and Barring Service (DBS) checks. A DBS check helps a service to ensure the applicant's suitability to work with vulnerable people.

We looked at staffing levels and found that whilst there were sufficient numbers of staff to meet the needs of people who used the service, the provider faced on-going challenges around recruitment and retention of support workers. One relative told us, "As with any social care organisation there are more staff changes than we would ideally like to see. However [person] copes well with this, especially as someone with autism, because of the containment and consistency provided by the wider organisation. Managers tend to stay in post which helps to ensure that a familiar culture continues despite personnel changes." We spoke with the registered manager about this and we told how they sought to maintain a core of staff who knew people and who provided continuity of support. Additional staff, through bank staff or agency, were used flexibly to ensure people's needs were met.

The service maintained health and safety records relating to buildings and premises and a detailed business continuity plan was also available. Fire safety equipment was maintained and checked regularly. Emergency lighting was checked and a first aid kit was readily available. Gas and electrical safety certificates were up to date. Portable electrical appliance testing (PAT) was completed along with water temperature checks. Emergency contact information was readily available in case of a domestic emergency such as flood, fire or loss of power. The service did not use any moving and handling lifting devices such as portable hoists.

We looked at how well people were protected by procedures for the prevention and control of infection. We found the service had an infection prevention and control (IPC) policy with associated procedures. During our inspection, we found the service to be visibly clean and tidy and maintained to a good standard. Records of cleaning schedules were also maintained and available to view.

## Is the service effective?

### Our findings

People who used the service at Broom Lane were supported by well trained and highly skilled staff. Relatives and health and social care professionals told us staff were well trained and that the service was very effective in meeting people's needs. One relative commented, "The staff are really well trained. They have exceeded my expectations." Another relative told us, "Nothing compares to them." A third relative commented, "[Relative] has been placed in quite a few services over the years but the staff and management are without doubt one of the best in the business." A community learning disability professional told us, "The training is very good, much more than most providers."

During our inspection visit, three people who used the service proudly gave members of the inspection team a guided tour of their properties. Each flat viewed was modern and well maintained and personalised with peoples own effects. One person told us, "I really love my own flat. Its great living here." Another commented, "I'm saving up to have my flat decorated, I've chosen the colour I want."

A comprehensive induction and training programme was in place for new staff and a framework for continuous professional development was well embedded for established staff. All new employees were required to sign-up to complete the Care Certificate. The Care Certificate is a set of standards that social care and health workers to follow in their daily working life. It is the minimum standard that should be covered as part of induction training of new care workers. We saw how the service had adapted the Care Certificate syllabus in order to make it more relevant for supporting people living with autism and learning disabilities.

All new staff completed a mandatory two week period of shadowing and formal observations before commencing in their substantive role. This meant new staff gained a better understanding of the people being supported. Throughout a person's probation period, team leaders held regular reviews in order to continuously assess competency and suitability for the role. Key areas of learning throughout induction included moving & handling; first aid; safeguarding; CITRUS (Creative Intervention Techniques in Response to Untoward Situations); core values; supporting people with autism; person-centred thinking & planning, and maintaining & promoting health. We spoke with staff that had been recently recruited. One member of staff told us, "I've never had so much training before. It's fantastic though." Another commented, "I've worked in care for years but this is by far the best organisation I've worked for regarding training. I feel like the organisation is really investing in me"

The provider had a clear development framework that gave staff a line of sight for continuous professional development. For example, staff in the role of 'apprentice team leader' completed a comprehensive in-house development programme comprising of 17 modules. This ensured that people acquired the knowledge and skills they needed to act at their level of responsibility. One member of staff told us, "The support and encourage I've received to progress from support worker has been amazing. Opportunities for learning and professional development are the best I've ever done."

Staff received support to understand their roles and responsibilities through well-structured and meaningful supervision and annual appraisal. Staff had regular supervision sessions known as 'job consultations.' One member of staff told us, "Job consultations are excellent. I feel really engaged in the process and the sessions are not just a talking shop." Supervision and appraisals are used to review staff performance and identify any training or support requirements.

The service demonstrated industry leading best practice through continued professional accreditation with The National Autistic Society. During their last accreditation visit in 2016 the service was commended for the high quality support offered to people with autism. The assessment panel noted in their report, 'the organisational approach to the support of people with autism was systematic, cohesive and with a strong focus on detail whilst ensuring an individual's personality, aspirations and interests remain central.' As part of our inspection, we contacted a representative from The National Autistic Society who knew the service well and they told us, "I have had the opportunity to meet with a number of autistic people that live at Broom Lane and to observe staff interaction and support. I have noted that staff work in a calm and sensitive manner and have demonstrated a clear understanding of each person's strengths and abilities and support needs during my observations."

Intrinsically linked to the continued autistic accreditation was the professional services delivered by the providers in-house Central Support Team (CST). The CST consisted of professionals including a PBS lead, speech and language therapist, autism lead and assistant practitioners. The CST also linked into a group of external professionals including a clinical psychologist and qualified behaviour analyst for specialist clinical supervision and complex behaviour assessments. Staff across the service worked collaboratively with the CST to provide a seamless joined-up service which delivered enhanced levels of care and support.

Throughout our inspection visit, it was strikingly apparent the service had the right people, doing the right job at the right time. This meant the service was highly effective in responding to people's individual needs. A visiting professional behavioural analysts told us, "The service is really pushing things to the next level. The introduction of practice lead roles means the service is much better placed to recognise and respond to people with less complex needs. For those people with more complex needs, the fact the service is continuing to build its own in-house professional expertise means the level of assessment and support is first class."

We looked at how people who used the service were supported to maintain good health and to access health care services. We looked in detail at six health action plan's (HAP) and found these detailed all health appointments, an action plan for each appointment and where appropriate, clear guidance on how to support the person to attend the appointment through social stories. People had a hospital passport providing hospital staff with brief details of the person's needs and how they communicated. In each of the HAP's we looked at, a full range of medical professionals were engaged with people including GP, dentist, optician, chiropodist and mental health services. Where appropriate, specialist support was also used. For example, the community learning disability team had provided support to one person around sexual health. We saw positive feedback had been provided to the service by a community professional who said, "I would like to take this opportunity to say well done to your team for keeping up to date with [person] health checks and their health action plan." A relative we spoke with told us, "I really don't think [person] has ever been so well as they are right now. [Person] has lost weight and is more active than ever before. It's all credit to the staff."

The service had renewed its commitment to the Health Charter for Social Care Providers. This is a national evidence based initiative designed to tackle health inequalities people with learning disabilities experience. The service explored innovative ways to ensure people maintained good health. For example, good nutrition was promoted by introducing 'veg of the month.' This meant a fresh seasonal vegetable would be selected each month and people who used the service would be encouraged to develop new and creative recipes using that particular vegetable. Two people who used the service at Broom Lane had recently won an award for creating the best recipes from leek vegetables. We spoke with one of the winners and they spoke with great enthusiasm about how much they had enjoyed creating the recipes. They also proudly showed us a recipe book that had been created to include all the leek recipes produced by everyone who contributed.

The service had also consulted widely with staff and developed a collaborative approach to the health charter which saw staff within the service commit to making healthier choices and to lead more active lifestyles. Staff had agreed to not consume junk food whilst at work and proactively worked alongside people who used the service to reduce portion sizes, avoid unhealthy snacks and drinks and to get more active. A varied and wide ranging programme of physical well-being activities was readily available for people to participate in. This included hike's into the countryside, mountain biking and gym and swimming sessions at the local leisure centre. One relative told us, "I just wouldn't have the energy to do all of the things staff at Broom Lane do with [person]. Nothing is a barrier and they just get on with helping [person] lead a really fulfilling life."

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 so that they can receive care and treatment when this is in their best interests and legally authorised under MCA.

Broom Lane provides supported living within a community setting therefore any decision to deprive a person of their liberty within the community must be legally authorised by the Court of Protection. We found that people's mental capacity to make decisions was assumed unless there was concern to suggest otherwise. Where people did not have capacity to make decisions about their care or support, meetings were held with people, their relatives and health & social care professionals to ensure that any decisions were made in people's best interests. This was in line with the Mental Capacity Act (2005) Code of Practice (MCA). At the time of our inspection, 10 of the 17 people being supported had restrictions in place that were waiting to be formally authorised. However, we saw all the appropriate documentation had been completed in line with the MCA and submitted to the relevant authorities. Restrictions were deemed to be in people's best interest and to be the least restrictive.

People deemed to have capacity were able to make decisions and choices for themselves and were free to leave at any time. However, the service had effective safeguarding and risk management strategies in place to ensure that when people who used the service chose to leave, this was managed as safely as possible. For example, individual protocols were in place if people who used the service had not returned by a certain time.

We looked at a sample of tenancy and licence agreements to ensure information was presented to people in an accessible format and that offers of accommodation were made in line with the MCA. The service worked collaboratively with the registered social landlord to ensure tenancy agreements were provided in easy read format. Where people lacked capacity to sign their own tenancy agreement, we saw documentary evidence that due process had been followed via the Court of Protection.

## Is the service caring?

### Our findings

The service's ethos, vision and values promoted people's rights to make choices and live fulfilled and valued lives. This was well reflected in the exceptional care and support people received from a committed, passionate and caring group of staff.

Throughout our inspection visit, we observed staff demonstrating kindness, patience and respect and people were given time to express themselves fully. Staff knew people well and interactions were relaxed. People who used the service spoke with great fondness and affection about the staff. One person said, "I really like [member of staff] and [member of staff] they really help and are always there when I need them." Another person told us, "I love it here. The staff are great. I don't dislike anyone." A third person said, "Sometimes I can't do everything that I want but that's OK. The staff tell me why and are really kind." Some people who used the service at Broom Lane had non-verbal communication skills. We met one person and when asked about the staff and living at Broom Lane they gave a big wide smile and a 'thumbs up'. Another person indicated positive emotions through gestures and smiling.

People we spoke with were consistent in their high praise of the service. One relative said, "I'm absolutely over the moon. The service has far exceeded my expectations. The staff are so caring. They have been wonderful with [person]." Another relative told us, "It's hard to find the words to express how I feel about Broom Lane. Everyone from the manager to the support workers are just amazing. So dedicated, knowledgeable and conscientious." A third relative told us, "[person] was quick to seize the developmental benefits of being with workers who are committed to helping them enjoy life to the full. As [person] shows challenging behaviours, the staff team are helped by a supportive and intelligent management structure to understand the context for such behaviours, and are enabled to support [person] at such difficult times." A community professional told us, "The whole approach taken by the team is caring and compassionate. It's a wonderful place to visit."

Staff spoke with great pride about the people they supported. It was clear people were highly motivated to provide care and support that was kind and compassionate. One member of staff commented, "This is the place to be if you want to help people. We are like one family that includes staff and the people we support." Another commented, "This is the only place I've ever worked where I literally do not look at my watch. The work is so rewarding and the people we support are amazing."

The service had gone above and beyond to help and support a couple who used the service to get married. We saw how a key member of staff had worked collaboratively with the couple to help organise their special day and to truly make it one to remember. Their wedding had been featured in the services' in-house magazine and we saw a collection of wonderful pictures which demonstrated it was a special occasion. Testimony from the couple included comments such as, "I was nervous but it was worth it. I can't get over it. It's great that we did it." "I wasn't scared, I was before but just told myself to chill and enjoy it." We learnt how the member of staff involved had worked tirelessly in the year leading up to the wedding to ensure the couple had a special day. This included help with organising everything from the limousines, the registry office, guest invitations and the wedding reception.

We looked at Broom Lane's approach to equality, diversity and human rights and how people from different backgrounds were supported. For example, people who identified as lesbian, gay, bisexual or transgender (LGBT) and people of non-white heritage. We saw that through the service's comprehensive and inclusive approach to support planning, key information about people's lives, their individual identity, culture and what was important to them was captured to good effect. The open, inclusive and supportive nature of the service meant that promoting equality and diversity and respecting people's human rights, was a golden thread that ran through every aspect of the service.

People who identified as LGBT were given equality of opportunity to access culturally and socially appropriate activities and to integrate within the wider LGBT community. This included support to attend sessions at the LGBT Foundation and to participate in the annual Manchester Pride event. People of non-white heritage were well supported to maintain cultural and religious links with their wider community. This included equality of opportunity to make choices around a culturally appropriate diet and support to attend their place of worship. For example, we saw how staff had worked with the Iman from a local mosque to arrange for a person who used the service to attend prayer at less busy times. This was important because this person often did not cope well in busy crowded places.

Equality and diversity training had been delivered to staff with topics covering issues around discrimination, protected characteristics, types of discrimination, indirect and direct discrimination, reasonable adjustments and harassment. Staff we spoke with had excellent underpinning knowledge around equality, diversity and human rights and translated this into real practice each and every day. One member of staff told us, "I suppose we don't really think of it as diversity or human rights. Each member of staff is so committed to treating people with respect and valuing each person we support, it's just natural and we get on with it." Another member of staff told us, "The culture we have within this company means that any kind of discrimination or treating people unfairly just isn't tolerated. Due to the nature of our work there's simply no room for that here."

Information and explanations was provided to people through the use of 'social stories'. Social stories are a method of sharing information using visual supports. These were used to excellent effect at Broom Lane, were highly person centred and utilised in a variety of innovative ways. For example, social stories we used to teach social skills; this included understanding rules and expectations, identifying important cues in a particular situation, understanding another's point of view and explanations around upcoming events. The CST had delivered training sessions to practice leads so that social stories could be developed more dynamically and in response to people's changing needs. Ahead of our inspection visit, the lead inspector was asked by the registered manager to provide a photograph to be included in a 'CQC visit social story.' The lead inspector was happy to do this and we saw throughout the inspection visit how this had helped people who used the service to understand why we were visiting their home. This meant that the service continuously sought ways to provide people with information about their support and involve people in decisions about what they wanted to do.

Where people did not have any family or if there was a dispute with the family about a person's support, we saw that appropriate referrals had been made to advocacy services such as Independent Mental Capacity Advocates (IMCAs). This meant people who used the service always had an independent person representing their best interests and to ensure their voice was heard and opinions respected.

Each person had 'individual plans' which focused on their aspirations. These were developed in collaboration with people in order to achieve their personal goals. For example, we saw people had set individual goals linked to going on holiday, getting a new job, getting a new mobile phone and having laminate flooring fitted. Each pathway was highly detailed and incorporated a number of specific steps which included the development of new skills, timescales and responsibilities.

The service maintained detailed evidence files to demonstrate how individuals were progressing along their individual pathway and to recognise when key milestones had been reached. One person who used the service shared with us their plans to travel abroad. They said "I'm being helped to save money regularly and [member of staff] has sat down with me and we work out the things I'd like to do when I go on my trip. I'm really excited about this and can't wait to go very soon."



## Is the service responsive?

### Our findings

On the first day of our visit, the inspection team were warmly welcomed by one person who used the service who gave an audio visual presentation of their photographic work. This person was a keen photographer and utilised their skills by taking photographs and videos throughout the year and at a variety of events and locations. This person spoke with great pride and passion recalling when and where the images were taken. We were told, "I enjoy taking pictures. I really like going to new cities and into the countryside and taking photographs." We later spoke with a close relative of this person and they told us, "The staff always find innovative ways to use [persons] photographic skills. It validates [persons] hobby into something real."

People received support which was in line with their needs and preferences. Support planning documentation was divided in to distinct areas including person centred plans, health action plans, education action plans and risk assessment management plans. Records were comprehensive yet easy to navigate. This meant the reader had an excellent understanding of peoples individual baseline support needs. People had a wide range of individual assessments tailored to meet the needs of people living with autism and/or a learning disability. This included comprehensive assessments and support plans centred on behaviour support, communication, and sensory issues. A community healthcare professional told us, "Support planning, guidance and monitoring is very good. Analysis completed by the service is excellent."

A key development since our last inspection of Broom Lane was the introduction of support worker practice lead roles. Practice leads were recruited from experienced staff who demonstrated a thorough understanding of people living with autism and/or a learning disability. Newly recruited practice leads were supported by a mentor and were required to provide practice based evidence through a competency framework. Key areas of responsibility for the practice leads included frontline implementation of positive behaviour support (PBS), assessment, planning, coordination and implementation of bespoke packages of support and activities according to a supported persons individual needs, and to implement any changes identified through a person's review.

Through talking with people, staff and relatives and by looking in support records, we saw how the practice leads had quickly made a significant positive impact to people's lives. For example, one person had historically been reluctant to engage in various functional living skills activities. However, through more intensive support delivered by a practice lead, we saw how major personal gains had been made with activities around the house such as meal preparation and laundry tasks. The frequency in which this person participated in outdoor activities had also increased. This meant they had grown in confidence and developed new skills which promoted independence. A member of staff told us, "The lead roles now mean we can focus expertise on people when it matters. It's a great improvement and means the outcomes for people are getting better. Sometimes its only small gains but that's still fantastic." One relative commented, "The targeted support provided to [person] has been fantastic."

We spoke at length with the speech & language therapist and assistant practitioner. Both demonstrated a high level of subject knowledge with regards to supporting people living with autism and learning disabilities. Both spoke with great passion and enthusiasm about continually finding new and innovative ways to ensure the service remained responsive to people's individual needs. We saw how their contribution was making a real difference to people's lives. For example, a person with non-verbal communication needs was initially very reluctant to mix and integrate when first moved into Broom Lane which meant they were at a greater risk of social isolation. We saw comprehensive evidence that demonstrated a considerable amount of time had been spent working with this person and a tailored support package was developed to meet their individual needs. The outcome of this was that the person had grown in such confidence they were eventually able to go out to the supermarket with staff maintaining their support at a distance. This had enabled the person to gain the skills to choose their own food from a shopping list.

We saw how the assistant practitioner had been integral in developing an innovative set of pocket sized laminated prompt cards for staff. These were individualised and person-centred and provided both a pictorial and easy to read prompt on how best to support a person. These were especially useful for new staff and any bank or agency who were supporting people.

People were exceptionally well supported when transitioning between services. This included support provided before a person moved into the service and throughout their placement. Records demonstrated a multi-disciplinary approach was taken and that people's needs were comprehensively assessed before they moved into Broom Lane. We looked at one person's individual journey who had recently been placed at the service. We saw that meetings had taken place involving the supported person, people who were important to them and other professionals involved in their care and support. A range of comprehensive assessments had been completed including an observational assessment, interim risk assessment and management plan and a capacity assessment. Meetings were also held with the registered social landlord to discuss tenancy options.

Within three months of this person being accommodated at Broom Lane, a detailed and comprehensive multi-disciplinary review had taken place. This clearly identified what was working well, areas for development and strategies and plans for the future. This person had attended college on a full time basis which occupied a significant amount of their time. However, their studies had come to an end and a new programme of support and engagement needed to be developed. Through a combination of intelligent analysis of historical activity data and a profound understanding of the individual, gained through high levels of positive engagement, staff had developed a new programme spanning a broad range of daily living, social, cultural, leisure and community engagement activities.

During our inspection we were not able to speak directly with this person as they were out in the community. However, we spoke with this person's close relative and we were told, "I cannot believe in just a short space of time they truly know everything about [person] it's absolutely fantastic. The team have been really supportive in preparing [person] to leave college and the new timetable is great. It means [person] will continue to learn new skills and be productive every day."

The provider was exceptional at developing new and innovative ways to enable people who used their network of services to access inclusive and purposeful paid and unpaid employment opportunities. The provider fundamentally recognised that people living with a learning disability faced additional challenges and discrimination when seeking employment. To address this imbalance, the provider established its own Community Interest Company (CIC) with a clear mandate: Employment for parity, visibility and purpose. We saw people who used the service at Broom Lane had benefited from work experience opportunities first afforded to them through the CIC.

One person had been seeking external employment opportunities for in excess of four months without success. However, after gaining real employment experience, we saw how this person had developed real self-belief and grown in confidence. They eventually went on to gain employment with a national supermarket chain and soon after joining the company, won an 'employee of the month' award.

A flagship initiative for the service was the continued development of Yew Tree Activity Hub. This community based resource offered a comprehensive programme of activities that were suited to people who enjoyed more physical work or for those who flourished by being creative and expressive. For example, opportunities available to people included dance workshops, music creation, costume making, allotments, gardening and wood skills. The activity hub also benefited from its own kennels and stables. This meant people were able to work with animals large and small, from dog walking to horse grooming. Horse riding also took place three times a week.

Activities were also tailored to meet people's individual needs. People would be supported to attend local gym sessions and to go mountain biking. These activities had been identified as being particularly beneficial for some people. For example, one person was supported to go to the gym before they visited their family. This was shown to help reduce this person's anxiety levels and significantly reduced behaviours that might challenge. This meant the family visit was a far more positive experience for everyone.

People who used the service, their family and friends and staff from across the providers network of services had previously participated in the annual Manchester Day parade. This event is organised by the city council and celebrates everything great about the city. We saw pictorial evidence and heard wonderful accounts from people about how fantastic this event was in 2016. However, the services plans for participating in the 2017 parade were interrupted by the Manchester terrorist attack. As a consequence of the attack, levels of anxiety and distress were raised amongst people who used the service. We saw how staff had used social stories as a means of explaining this event but people remained worried and concerned. Staff within the service took the decision that for this year, they would not seek to participate in the parade. However, we found the response from the service was remarkable. In a short space of time an alternative event was organised and the 'wonderland festival' was created. Based on the theme of Alice in Wonderland, a date was set over a weekend in July and work started to plan and organise the event. On the day, there was live music, a prize stall, BBQ and a fantastic costume parade which showcased the costumes worn by people who used the service and staff alike. We saw photographic evidence and heard testimonies from people which clearly demonstrated how much of a success the day had been. One person told us, "I loved dressing up in my costume, it got a bit hot but I had a great time!" A member of staff commented, "It was hard work to organise things in a relatively short space of time but the event was simply fantastic. We couldn't have wished for a better response from everyone."

A 'Tenants Voice' group was well established which sought to encourage people to have a greater involvement in their lives and a real voice in the service they received. To ensure the process was accessible to all people, information at the meetings was presented in a variety of formats, including written, verbal and pictorial based interactive materials. However, staff had continued to look at more engaging ways to understand the views of people with non-verbal communication skills. We saw how 'tenants voice' was now in its third phase of development and that sessions were held with people on a one-to-one basis. We looked at one person's record and saw sessions were completed every six weeks. Topics included 'I want to talk about', 'what I don't like' and 'things I'm worried about'. Documentation was in easy-to-read format with good visual prompts.

People were actively encouraged to give their views and raise concerns or complaints. There was a clear, unambiguous complaints policy and procedure that was accessible to everyone. We looked at a sample of records which detailed complaints made by people who used the service. The methods used by people to raise a concern or complaint ranged from sending a text message to making a verbal complaint. In each instance, staff took their time to understand the nature of the complaint.

We saw that easy-to-read documentation was used to good effect and that people's concerns were captured effectively and clear explanations given as to how the matter would be resolved. The registered manager completed a service wide 'complaints & tracker form' to capture details of each complaint and to record the outcome.

The provider produced its own magazine that was focussed on people's achievements and upcoming events. We read several copies and found the content to be insightful and people who used the service were clearly very engaged in making contributions to the magazine. People supported at Broom Lane featured in a number of editions with articles published covering parties and events people had attended, employment opportunities and hobbies and interests.

## Is the service well-led?

### Our findings

Without exception, people we spoke with told us they considered Broom Lane to have outstanding leadership. One relative said, "The whole management team are amazing." Another commented, "We have always been impressed by the forward thinking and creative management of City Care Partnership, and this is also shown by the local managers at the Broom Lane site." A third relative told us, "There are not enough words to describe how fantastic I consider the management team at Broom Lane to be. I visit on a regular basis and I've always found them welcoming, open and honest." Comments from community health and social care professionals included, "On a daily basis I go into many services across the city and I can say with confidence, Broom Lane is up there with the best of them. The manager is knowledgeable, staff know people well and it's a pleasure to visit."; "The manager is progressive and very well supported by a team of dedicated individuals."

Broom Lane benefited from a long-serving and well-established local management team. The registered manager was well supported by area team leaders and benefited from the input of an experienced regional manager. At provider level, the director of health & social care maintained oversight and knew the service well. We saw how recent improvements had been made to ensure a team leader was always on duty later into the evenings and at weekends. This meant the management team maintained oversight for longer periods and were able to respond in a timelier manner. There was an open, honest and positive culture across the service and staff demonstrated a high value base. This was clearly led from the top down.

At the start of the inspection visit, the registered manager gave the inspection team a tour of the premises. During the tour, we met people who used the service and it was clear the registered manager knew people well and interactions were warm, friendly and informal. The registered manager spoke with great passion and enthusiasm and demonstrated a high level of subject knowledge with regards to supporting people living with autism and learning disabilities.

Staff spoke highly of the registered manager and members of the wider leadership team at Broom Lane. One person told us, "What can I say about the manager. She's just amazing and enables us all to do amazing things every day." Another said, "She commands a lot respect from all of the staff, she's unbelievably professional and shows real empathy. What's best of all, she started where I am now, as a support worker." A third member of staff said, "The management are really flexible and really supportive around being family friendly." A fourth person told us, "The managers are very professional, approachable and easy to talk to. They really listen. The registered manager leads from the front." When referring to the regional manager, one member of staff told us, "He's the true role model of city care."

Staff were actively encouraged to express their views and opinions. Employees up to the grade of team leader participated in the staff consultation group 'Voice in Action.' The group was empowered to find innovative ways to resolve day-to-day operational issues and to have a say in the way the company was run. The provider also ran annual company development days. The aim of the development day was to provide an opportunity for staff to discuss projects undertaken by the provider, highlight interlinking themes and promote shared responsibility. Staff we spoke with viewed the development days as a positive means of

engagement and enabled them to be involved at a strategic level. We also looked at an evaluation document and saw how input from staff had affected positive change. For example, through the 'voice in action' group, improvements had been made to staff welfare facilities.

The mental and physical well-being of staff was considered a high priority and we saw how the service had recently implemented stress management training for all staff. Part of this training was to work collaboratively with staff to understand key triggers and contributory factors which may cause a person to feel stressed. Individual stress management kits had been developed and these had been personalised by staff. For example, we were shown four kits that had been tailored around the themes of 'energise', 'worry less', 'pamper yourself' and 'get creative.' Staff also had access to a comprehensive employee assistance programme which included a confidential 24 hour advice line. Staff could self-refer and support was available for a wide range of issues.

The registered manager and management team at Broom Lane recognised, promoted and regularly implemented innovative systems in order to provide a high-quality service. The service sustained outstanding practice and improvements over time and worked towards, and achieved, recognised quality accreditation schemes. The registered manager and staff team signed up to the social care commitment. This is seen by the Department of Health as a key part of the solution to raising the standard of, and the public's confidence in, care and support offered within social care. The commitment is made by signing up to seven 'I will...' statements and their supporting tasks, namely; treat people fairly, work responsibly, uphold dignity, continue to learn, work cooperatively, protect privacy, and communicate effectively.

The provider had worked with external positive behaviour consultants to extend the principles of positive behaviour support (PBS) into leadership and management. Consultants worked with staff and managers through a combination of workshops, training sessions and questionnaires. The main emphasis of this work was to understand how valued staff felt, their general happiness at work and the frequency in which positive feedback took place between a manager and member of staff. An evaluation completed into the project demonstrated how there had been a significant cultural change within the organisation and a shift from negative messaging to one that was wholly positive. Comments from managers involved in the evaluation included, "The general atmosphere and esteem of staff seems to be better. Even during tougher days with sickness and stuff, morale has stayed high and I think this has been because of the positive feedback and making it an environment where staff are being praised for doing a hard job." Another respondent had commented, "I feel happier and less stressed as I'm not always focusing on what people aren't doing but what they are doing well. It has also helped me to frame feedback in a more constructive positive manner."

We looked at how the registered manager and staff worked with other agencies. A strong ethos around effective partnership working was in place and it was clear excellent working relationships had been forged with community professionals from the local authority and NHS. A community social care professional told us, "Broom Lane is integral to the services provided in Manchester for people living with a learning disability." The registered manager attended provider forums and the service bench-marked itself against other services in the sector. The service was also happy to invite other providers to their service to share good practice.

The service had well established and comprehensive systems in place for quality assurance and audit. An innovative approach was taken through Periodic Service Review (PSR). The primary aim of the PSR was to enhance and maintain high quality service delivery and was both a tool for prompting actions and a system of measurement. The PSR was a set of agreed standards and accompanying operational definitions by which the service would measure themselves against. These standards covered areas from administrative duties, quality of life, support documentation, support & supervision, health & medication and health & safety. There was an easy to follow score sheet and a system to provide monitoring and feedback to ensure desired quality is maintained.

The provider had been in receipt of Investors in People (IIP) accreditation since 2011, this demonstrated the provider's continual commitment to maintaining this accreditation. IIP is an external organisation that checks how services manage their staff against set standards. Their accreditation programme looks at the leadership, support and management of employees and identifies good practice or areas for improvement. In their most recent accreditation report, the service had been commended for the training and development of staff.

The service had policies and procedures in place which covered all aspects of the service. The policies and procedures were comprehensive and had been updated when legislation changed. Staff told us policies and procedures were available for them to read and they were expected to read them as part of their induction and training programme.

We looked at the minutes from various team meetings which had taken place. We saw actions had been set and then followed up at the next meeting with any progress that had been made.

Throughout the inspection, we asked the registered manager for a variety of documents to be made available. We found documentation was kept securely locked away and was well organised enabling the documentation requested to be accessed promptly. We found all the records we looked at were structured and well organised which assisted us to find the information required efficiently. This made information easy to find and would assist staff if they were required to find information quickly.

The registered manager made statutory notifications to CQC in a timely manner and follow-up information was provided when appropriate.

The registered manager and every member of staff we spoke with was open, honest, transparent and thoroughly engaging throughout the whole of the inspection visit.