Green-Haven Support Limited

The Office

Inspection report

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Ratings

Overall rating for this service	Good

Is the service safe?	Good
Is the service effective?	Good
Is the service caring?	Good
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service
The Office is a supported living service providing personal care to five people living in a bungalow adjacent to the organisation's office. The service is registered to support people with autism and/or a learning disability, mental health needs and physical or sensory needs.

People's experience of using this service and what we found
We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. There was a strong focus on supporting people to be independent, develop their skills and access their local community. This enabled people who used the service to live as full a life as possible and achieve the best possible outcomes.

There were enough staff with the right skills and experience to provide the care and support people needed. Staff told us they felt well supported by the management team and were confident raising concerns or suggestions.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

Care plans were appropriate for the service and people were fully involved in the development of the care plans.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection
This service was registered with us on 17 October 2019 and this was the first inspection.

Why we inspected
The inspection was carried out to enable us to give the service a rating.

Follow up
We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe? The service was safe.	Good
Is the service effective? The service was effective.	Good
Is the service caring? The service was caring.	Good
Is the service responsive? The service was responsive.	Good
Is the service well-led? The service was well-led.	Good

The Office

Detailed findings

Background to this inspection

The inspection
We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team
The inspection was carried out by one inspector.

Service and service type
This service provides care and support to people living in a 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection
We gave the service 24 hours' notice of the inspection. This was because the service is small and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection
We reviewed information we had received about the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection
We spoke with four people who used the service. We spoke with the registered manager and the nominated

individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included two people's care records and one person's medication records. We looked at one staff file in relation to recruitment. A variety of records relating to the management of the service were reviewed.

After the inspection
We continued to seek clarification from the provider to validate evidence found. We spoke with two members of staff and a professional with experience of the service.

Good

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Assessing risk, safety monitoring and management

- People were protected from the risk of abuse. Staff told us they had no worries about people's safety and were confident the registered manager would deal with any concerns they might raise.
- People told us they felt safe. We asked one person what they liked best about living in their home and they told us; "I feel safe because everyone is really nice" and "I would say if I was worried."
- Staff were aware of any health conditions that might impact on people's safety and knew what action to take to mitigate the risk.
- Staff supported people to take positive risks to increase their independence while talking with them about the importance of keeping themselves safe.
- The registered manager was in the process of developing Personal Emergency Evacuation Plans for people so they could be helped to leave the building safely in an emergency.
- The fire service had completed a recent assessment of the service and made some recommendations which were being addressed.

Staffing and recruitment

- There were enough staff to support people to take part in activities in their home and in the community.
- It was a small staff team who worked regular hours. One staff member worked flexibly so they were able to cover annual leave and sickness.
- People were recruited safely, and the relevant checks completed before new staff started work. Some recruitment records lacked detail and we discussed this with the nominated individual and registered manager. Following the inspection, they contacted us to say they had developed the recruitment files so all relevant information would be captured.

Using medicines safely

- People were supported to manage their own medicines with minimum support. Staff spoke to people about the medicines they took to help them understand why they took them and any likely side effects.
- Staff received training in medicine administration. When necessary, they prompted people to take medicines in line with their prescriptions.

Preventing and controlling infection

- People told us staff supported them to keep their homes clean. Staff confirmed they encouraged people to be independent in this area of their lives.

● During the pandemic people had been kept well informed about how to keep themselves safe.
● Systems for routine staff testing were not well established. We discussed this with the registered manager and nominated individual and signposted them to the relevant guidance. Following the inspection, they confirmed they were now working in line with the guidelines.

Learning lessons when things go wrong
● The registered manager and nominated individual were actively involved in the day to day running of the service. They reflected on how to support people to improve their experience following any untoward event.
● The registered manager described how they had worked with one person to improve how staff worked with them. They told us they had learnt from the persons reactions and behaviour what worked well and what did not.

Good

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law
- People using the service were involved in initial assessments to identify if their needs could be met by The Office.
- The service was working in line with the underlying principles of Right Support, Right Care, Right Culture. For example, people led meaningful lives and were supported to have choice, control and independence.

Staff support: induction, training, skills and experience
- Staff told us they were well supported to develop the skills they needed to carry out their roles and responsibilities.
- New employees were required to complete an induction including mandatory training. Those new to care were supported to complete the Care Certificate.
- A new mobile app system had recently been introduced to record when people received care and support. Staff told us they had been well supported while getting to know the new system.
- Staff received supervision and told us they were able to approach a member of the management team for advice and guidance at any time.

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care
- We saw staff supporting one person to prepare a healthy meal. The person was proud of the meal and said they often cooked with staff.
- Staff were aware of people's preferences in relation to food and knew how best to encourage them to eat a balanced diet.
- Some people were at risk of poor health due to their lifestyle choices. Staff encouraged people to take regular exercise and access the local community.
- The registered manager contacted other healthcare agencies for advice and support when they identified any change in people's health.

Ensuring consent to care and treatment in line with law and guidance
The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as

possible.
People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- People were supported in line with the principles of the MCA. Staff obtained consent before delivering care and records showed people were fully involved in planning their care.

Good

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

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

Ensuring people are well treated and supported; respecting equality and diversity
- People were happy with the support they received and clearly had good and relaxed relationships with staff. One person told us; "They all like me here."
- Staff supported people to maintain relationships with relatives and people that mattered to them. During lockdown garden visits were arranged to help support on-going relationships.
- Staff received training in Equality and Diversity. The registered manager gave examples of how they had worked to ensure people had equal access to opportunities and were not discriminated against.
- A member of staff told us they particularly enjoyed spending one to one time with people as it helped them build relationships. They said: "It's nice, you get to know and understand them."

Supporting people to express their views and be involved in making decisions about their care
- Staff, the registered manager and nominated individual all encouraged people to express their views.
- People told us they made everyday decisions such as what time they got up, what they wore and how they spent their time.
- A survey was completed annually to gather and collate people's views. The registered manager and nominated individual told us they continually checked if people were happy with their care. The nominated individual told us one person was a natural spokesperson for the group, so they checked with them during a weekly car journey for any feedback.

Respecting and promoting people's privacy, dignity and independence
- The registered manager had high expectations for people, and this was reflected in how people were supported to develop their independence and be fully involved in decision making.
- There was a focus on encouraging people to do things for themselves with minimal support.
- One person could become distressed and found it difficult to manage their feelings. The registered manager had developed a series of strategies for the person to use at these times to help them self-calm.
- People were encouraged to develop and maintain personal relationships. The registered manager told us this had been challenging at times for one person commenting; "It can be difficult, but we try and keep it alive for [Person]."

Good

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People were involved in planning how their care was delivered. Staff worked with people to identify their goals and aspirations and used this information to design care plans which reflected their needs, preferences and interests.
- Care plans were accessible so people could be fully involved. One person had a specific health need and there was no corresponding care plan in place to guide staff on how to support the person, identify if the persons health was deteriorating and guide them on the action to take. Following the inspection, the registered manager contacted us to tell us they had developed a care plan to cover this area.
- Staff told us the care plans were useful and relevant. One commented; "All the information I need is in their care plans. If I'm unsure I can double check."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People were given information in a format which was meaningful to them. During the pandemic staff had worked closely with people to ensure they understood the guidance in place at any time.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff actively encouraged people to develop their social networks and access the local community.
- Some people were members of local groups and attended events which suited their individual interests. Others were more reluctant to take part in activities outside of the service. Staff continued to encourage them to expand their experiences. One member of staff said; "We keep trying, keep suggesting various things."
- The registered manager had identified local facilities which suited people's needs and preferences and enabled them to follow their interests in an environment where they felt comfortable.

Improving care quality in response to complaints or concerns

- People had access to information about how to raise complaints. The manager told us they encouraged people to voice their opinions and made sure they were listened to. No formal complaints had been received. The registered manger told us they addressed any issues as they arose and therefore things 'never

get that far.'

Good

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a culture of involving people in day to day decisions and planning their care to suit their needs and preferences. Staff echoed this ethos in their conversations with us. Comments included; "I go out on walks with [Person name], wherever they would like to go. Obviously it's up to them."
- The registered manager described how people had become more empowered and independent since starting to use the service.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- There was a strong emphasis on communication and sharing information in an open and transparent way.

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

- The registered manager was supported by the nominated individual and a director of the service, both of whom were heavily involved in the day to day running of the service.
- All members of the management team had clear roles and responsibilities while being able to work together as needed to achieve good outcomes for people.
- During the inspection the registered manager and nominated individual were open and demonstrated a commitment to providing person centred care and driving improvement.

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

- People and staff had equal access to opportunities.
- Staff told us they felt listened to and respected by management. They told us they were a good team who worked well together and had a shared set of values.
- Staff meetings were held and these were an opportunity to discuss individual needs and raise any suggestions for improvement.
- The nominated individual told us; "We like to have everyone in a place they enjoy being. If staff are happy, they will give good care. Happy staff equals happy clients."

Continuous learning and improving care

● During the inspection we discussed various guidance with the registered manager and nominated individual. When they were unaware of this they assured us they would follow this up.

● Staff told us there was an open culture and the management team were supportive if they raised any questions or suggestions.

● The management team regularly took part in on-line meetings with other providers where they could share information and learning.

Working in partnership with others

● A professional was positive in their feedback to us. They commented; "The management and staff are accessible and easy to contact as required."

● The registered manager gave us examples of when they had contacted other agencies for advice and guidance.