

HC-One Limited

# Oaklands (Essex)

## Inspection report

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## Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service well-led?

Requires Improvement 

# Summary of findings

## Overall summary

### About the service

Oaklands [Essex] is a residential care home providing personal and nursing care for up to 55 older people aged 65 and over; and people living with dementia. At the time of the inspection, 15 people were living at the service. The care home accommodates people in one adapted building.

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

People told us they were safe and liked living at Oaklands [Essex]. Observations demonstrated staff had a good relationship and rapport with the people they supported. Staff had a good understanding and knowledge of people's needs and the care to be delivered. People told us they were safe and suitable arrangements were in place to protect people from harm and abuse. Risks were identified and recorded to ensure people's safety and wellbeing. Recruitment practices were robust to ensure the right staff were recruited. People were protected by the service's prevention and control of infection practices and from the risk of transmission of COVID-19 and other infectious diseases. The environment was clean and well maintained. Lessons were learned and improvements made when things went wrong.

Effective systems were in place to monitor and improve the quality of the service provided through a range of internal checks and audits. Relatives and staff told us the service was well-led and managed and were positive about the improvements made since our last inspection to the service in December 2020. Staff felt valued and supported.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was Inadequate [published March 2021] and there were two breaches of regulation. A Warning Notice was served and conditions were imposed on the provider's registration.

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of these regulations. However, we could not improve the rating for 'Well-Led' because to do this requires consistent good practice over time. We will check this during our next inspection.

This service has been in Special Measures since December 2020. During this inspection the provider demonstrated improvements have been made. The service is no longer rated as inadequate overall or in any of the key questions. Therefore, this service is no longer in Special Measures.

### Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection. We checked whether the provider had met the requirements of the Warning Notice in relation to Regulation 12 [Safe care and treatment] of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and

conditions imposed on the provider's registration.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Inadequate to Requires Improvement. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Oaklands (Essex) on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### 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.

Details are in our safe findings below.

**Good** ●

### Is the service well-led?

The service was not always well-led.

Details are in our well-Led findings below.

**Requires Improvement** ●

# Oaklands (Essex)

## 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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection was completed by one inspector.

#### Service and service type

Oaklands [Essex] is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service did not have a manager registered with the Care Quality Commission. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided. The manager confirmed an application to be formally registered with the Care Quality Commission has been completed but not yet submitted to us.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

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 reviewed information we had received about the service

since the last inspection. We sought feedback from the Local Authority. We used all of this information to plan our inspection. 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 about their experience of the care provided. We spoke with five members of staff, including housekeeping staff. Additionally, we spoke with the manager, deputy manager and the service's Area Director. We reviewed a range of records, including three people's care records and two staff personnel files. We also looked at the provider's quality assurance and auditing arrangements.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We reviewed information provided to us by the manager and Area Director at the time of our inspection. We contacted and received information from four people's relatives about the quality of care received for their family member.

# Is the service safe?

## Our findings

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

At our last inspection in December 2020, medication practices did not ensure people always received their prescribed medication and improvements were required to the service's infection, prevention and control practices and arrangements. This was a continued breach of Regulation 12 [Safe Care and Treatment] of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. As a result of our concerns the Care Quality Commission took enforcement action by serving a warning notice.

At the last inspection this key question was rated as Inadequate. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm. Enough improvement had been made at this inspection and the provider was no longer in breach of this regulation.

### Using medicines safely

- We looked at the Medication Administration Records [MAR] for seven out of 15 people residing at the service. These demonstrated each person received their medicines at the times they needed them and in line with the prescriber's instructions.
- Observation of the medication round showed these were completed with due regard to people's dignity and personal choice.
- Suitable arrangements were in place to ensure staff who administered medication were trained and competent to undertake this task safely and to an acceptable standard.
- Medicine audits were viewed for the period April 2021 to June 2021 and confirmed a good level of compliance was achieved. Where corrective actions were required, audits had picked these up and appropriate actions taken to address the shortfalls.

### Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections and meeting shielding and social distancing rules.
- We were assured the provider was admitting people safely to the service and using PPE effectively and safely. Staff confirmed there were sufficient supplies of PPE available and staff were observed throughout the inspection to use PPE in line with government guidance.
- We were assured the provider was accessing testing for people using the service and staff in line with current government guidance.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises and making sure infection outbreaks can be effectively prevented or managed. The service was visibly clean and odour free.
- We were assured the provider was facilitating visits for people living in the home in accordance with current guidance.

### Systems and processes to safeguard people from the risk of abuse

- Relatives told us they had no concerns about the safety of their family member. We observed people using

the service were comfortable in the company of staff who provided support.

- Staff demonstrated a satisfactory understanding and awareness of the different types of abuse, how to respond appropriately where abuse was suspected and how to escalate concerns about a person's safety to the management team and external agencies, such as the Local Authority and Care Quality Commission.
- The management team were aware of their responsibility to notify us and the Local Authority of any allegations or incidents of abuse at the earliest opportunity.

#### Assessing risk, safety monitoring and management

- Risks for people were identified and recorded in relation to their care and support needs. Staff had a good knowledge of people and the risks associated with their care needs.
- Risks relating to the service's fire arrangements were monitored and included individual Personal Emergency Evacuation Plans (PEEP) for people using the service.
- Arrangements to assess current and emerging risks presented by the pandemic had been identified for people using the service and staff employed at Oaklands [Essex].

#### Staffing and recruitment

- The deployment of staff was appropriate and there were enough staff to meet people's needs. Staff responded to people in a timely way and call alarm facilities were answered promptly.
- Relatives confirmed there were currently enough staff available to meet their family member's care and support needs. Comments included, "The home is well staffed" and, "Oaklands [Essex] goes above and beyond." However, concerns were expressed about future staffing levels and once the number of people using the service increased.
- Appropriate arrangements were in place to ensure the right staff were employed at the service. Relevant checks were carried out before a new member of staff started working at the service. This included obtaining written references, ensuring the applicant provided proof of their identity and undertaking a criminal record check with the Disclosure and Barring Service [DBS].

#### Learning lessons when things go wrong

- This inspection highlighted lessons had been learned and improvements made since our last inspection. For example, suitable arrangements were now in place to ensure people received their medicines as prescribed and infection, prevention and control arrangements were safe and in line with current government guidance.
- Auditing arrangements at the service ensured there was better analysis and scrutiny of the service to enable the provider and management team to make the required improvements and to learn when things go wrong.
- The provider operated an open and transparent culture whereby staff were encouraged to report concerns and safety incidents. Appropriate arrangements were in place to review and investigate events and incidents and to learn from these. The manager had introduced lessons learned understanding for staff relating to complaints, safeguarding concerns and significant accidents and incidents. This enabled the provider and manager to review the measures required to prevent future reoccurrence.

# Is the service well-led?

## Our findings

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

At our last inspection in December 2020, effective quality assurance arrangements were not in place to monitor and improve the quality of the service provided. This was a continued breach of Regulation 17 [Good governance] of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. As a result of our concerns the Care Quality Commission took enforcement action by imposing conditions on the provider's registration.

At the last inspection this key question was rated as Inadequate. At this inspection this key question has now improved to Requires Improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Enough improvement had been made at this inspection and the provider was no longer in breach of this regulation. However, we could not improve the rating for 'Well-Led' because to do this requires consistent good practice over time. We will check this during our next inspection.

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

- The providers quality assurance arrangements monitored the experience of people using the service. This information was used to help the provider and registered manager drive improvement and to monitor the service's performance in line with their own policies and procedures and regulatory requirements.
- The Local Authority had completed an announced quality monitoring visit to Oaklands [Essex] prior to our inspection. The Local Authority confirmed improvements previously highlighted for action had now been addressed and the provider had complied with their action plan.
- Regular unannounced out of hour visits had been undertaken to ensure the routines of the service were appropriate and safe, particularly at weekends and at night.
- Relatives were happy with the communication and updates they had received during the pandemic, particularly relating to the service's vaccination, testing and visiting arrangements.
- The Care Quality Commission had been notified of all significant events which had occurred, as required.

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

- Since our last inspection in December 2020, changes had been made to the management of Oaklands [Essex]. This included a new manager and deputy manager, and a new Area Director was overseeing the service. The manager told us they had completed an application to be formally registered with the Care Quality Commission, but this had not yet been submitted to us.

- The manager understood the importance of their role and responsibilities. They demonstrated a commitment to providing good care for people using the service, providing support to staff employed within the service and ensuring compliance with regulatory requirements was attained and improvements made when things went wrong.
- Relatives and staff were very complimentary regarding the newly appointed manager and deputy manager; and told us the service was well managed and led. One relative told us as a result of previous frequent changes in the management of the service, Oaklands [Essex] had felt disorganised. However, improvements at the service were now noticeable. A second relative told us, "The management of the service is much better."
- People stated they knew who the manager was and were able to speak to them if they were unhappy or had concerns. Relatives told us, in the past concerns and complaints were not always addressed but this had improved.
- Relatives and staff told us communication within the service was much improved. Comments from relatives included, "I always get a call if there is a change in [relative's] condition or medication" and, "I get regular updates from staff and the management team when I visit." Staff stated they were confident to approach the manager and deputy manager.
- The manager confirmed they were supported and valued by the organisation, particularly from the service's senior management team.

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

- Effective arrangements were in place for gathering people's views of the service they received and those of people acting on their behalf. Comments recorded were positive and where areas for improvement were highlighted, action plans had been put in place or actions taken.
- Staff meetings were held to give staff the opportunity to express their views and opinions on the day-to-day running of the service. Staff told us they had a 'voice' and felt empowered and able to discuss topics.

Working in partnership with others

- Information showed the service worked closely with others, for example, the Local Authority, healthcare professionals and services to support care provision.