

Leonard Cheshire Disability

# Cobbett House - Supported Living Service

## Inspection report

Cobbett Place  
Warminster  
Wiltshire  
BA12 8NG

Tel: 01985213958  
Website: [www.leonardcheshire.org](http://www.leonardcheshire.org)

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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

Cobbett House Supported Living Service provides support for up to seven people, who live in their own self-contained flats within a main building. There was a communal lounge, office and toilet on the ground floor. People had tenancy agreements with Selwood Housing, and care and support were provided by Leonard Cheshire Disability. At the time of our inspection, six people were using the service.

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

People felt safe and there was a positive approach to risk taking. Systems were in place to protect people from abuse. There were enough staff to support people and medicines were safely managed. Communal areas were clean, and staff had undertaken infection control training.

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. People were able to have support with meal preparation and to access health care services if needed. Staff were well supported and received a range of training to help them keep up to date with their knowledge and skills.

People had built established positive relationships with staff. Staff showed a caring approach and promoted people's rights to privacy, dignity and independence. People were encouraged to give their views about the service and were able to direct their support.

People received a service that was tailored to their needs. People were encouraged to be as independent as possible but call for staff assistance when needed. Staff responded to people's needs in a timely manner. People had a detailed, well written support plan, that was regularly reviewed and updated. People knew how to make a complaint and were encouraged to raise concerns if they were not happy with the service they received.

There was a clear ethos, based on independence, that was adopted throughout the staff team. A range of audits were in place to assess the quality and safety of the service. There was positive feedback about the registered manager. They had a clear overview of the service and people's needs. However, there was no management structure and contingency plans had not been made in the event of the registered manager's absence. We made a recommendation to address this.

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

The last rating for this service was Good (published 6 April 2017).

Why we inspected

This was a planned inspection based on the previous 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?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

# Cobbett House - Supported Living Service

## **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 undertaken by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

This service provided care and support to people with a physical disability, living in their own flats within 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

This inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan

to make. This information helps support our inspections. We used all of this information to plan our inspection.

#### During the inspection

We spoke with five people who used the service and one relative, about their experiences of the service. We spoke with three members of staff and the registered manager. We reviewed a range of records. This included three people's support plans and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We contacted one health and social care professional and their team, for their feedback about their experiences of the service. However, we did not receive any response.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff had completed safeguarding training and were aware of their responsibilities to identify and report potential abuse or poor practice.
- Information about safeguarding was displayed for staff reference.
- Records showed whistleblowing was regularly discussed with staff.
- People told us they felt safe. One person said, "I feel safe as they're really good here. They're good to me."

Assessing risk, safety monitoring and management

- There was a positive approach to risk taking, which balanced risk and independence.
- Risks were considered and discussed with people. The risk assessments were documented, and action was taken to enhance safety where required.
- Protocols were in place for areas such as a person not returning to the service, when expected.
- People had a call bell to gain staff assistance if required and had a telecon system to give access to those who they wanted to see.
- The environment was well maintained and regularly assessed for risks such as fire hazards.

Staffing and recruitment

- There were enough staff to support people safely. The registered manager told us there were always three members of staff on duty during the day and there were waking night staff.
- Staff responded to people's requests in a timely manner.
- Staff confirmed there were enough of them within the team. They said they were able to spend time with people without rushing and accompany individuals to appointments or social events when required. One person confirmed this and said, "Staff here have time to talk to you."
- Safe recruitment was being followed. Records showed information was gained about the staff member's conduct and a disclosure and barring service (DBS) check was completed. This helped the registered manager make an informed decision about employing the staff member.
- The registered manager told us their recruitment practice was very thorough, as they only wanted staff who had the right values and would work well with people.

Using medicines safely

- People's medicines were safely managed. People were able to call staff to help them with their medicines or a pre-arranged time for support was agreed.
- Records showed people had been appropriately assisted with their medicines. This included making sure medicines were taken before the staff member left the person's flat.
- People were offered support to order their medicines, to ensure they had enough supplies.

- Staff had received training in the safe management of medicines, and their competency had been assessed. Information about the safe administration of medicines was available for staff reference, as required.

#### Preventing and controlling infection

- Communal areas and corridors were clean. People received staff support to clean their flat each week if they wanted this.
- Staff used antibacterial wipes, to clean surfaces in regular use.
- Infection control formed part of the provider's mandatory staff training plan. Records showed staff had completed this.

#### Learning lessons when things go wrong

- The registered manager told us reflective practice took place as required, with action taken where possible, to improve the service.
- Accidents and incidents were monitored, and actions taken to minimise any reoccurrences.



# 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. At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 were fully assessed before being offered a service. The registered manager told us to be suitable, each person had to have the potential of maximising their independence.
- People were regularly assessed to ensure their support was effective. One person was recently re-assessed for a new wheelchair to enhance their safety and overall wellbeing.

Staff support: induction, training, skills and experience

- Staff received a range of training to help them keep their knowledge and skills up to date. This included topics such as emergency first aid, communication awareness and fire safety. Records showed there were also training sessions related to people's needs, including epilepsy and oral hygiene.
- Staff told us they were happy with their training and felt well supported by each other and the registered manager. They gained support informally on a day to day basis and had one-to-one meetings with the registered manager. This gave staff the opportunity to discuss their performance, training needs and any concerns they might have.
- The registered manager told us they had a good team of staff who were experienced and had a clear understanding of people's needs. They said they did a lot of great work with people so regularly thanked them for this.

Supporting people to eat and drink enough to maintain a balanced diet

- People received support with meal preparation if required. Staff said they always encouraged people to choose what they wanted to have. One person told us, "The staff help me prepare a meal, but I organise my own shopping using an iPad."
- Staff told us they would inform the registered manager if they were concerned a person was not eating.
- Records showed some people were prompted to drink, at each staff visit.
- When talking to a person, the registered manager noted they had a drink beside them, but it had gone cold. The registered manager asked the person if they could make them another, which they agreed to. This promoted the person's fluid intake, as well as being responsive to their needs.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The registered manager told us people were supported to make and attend healthcare appointments if required. On the first day of the inspection, one person attended Headway, a charity that works to improve life after brain injury.
- People had health care plans in place. These identified any support people needed to maintain their health effectively.

- Records showed any consultations people were supported to attend. This included community nurses, dentists, speech and language therapists and wheelchair services.

#### 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager told us people had capacity and were encouraged to make decisions. They said any unwise decisions were discussed but ultimately if well informed, people had capacity to make these. They gave an example, whereby a compromise had been reached to promote a person's safety.
- Records showed people had been asked for their consent regarding different areas of the service. This included having a copy of the fire procedure on the back of the door to their flat.
- People told us they were encouraged to make decisions and give consent. One person told us, "[I have] more freedom and independence. I'm able to do what I want." Another person said, "I can choose the time to have a shower and I can eat what I want."
- On the second day of the inspection, one person told us they were not feeling well so were having a day in bed. They told us staff respected this decision and would give them any support they needed.

# 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. At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- There were various systems to ensure staff treated people with compassion and kindness. This included training and discussion, observational checks of staff and role modelling.
- Staff had undertaken equality and diversity training and there were posters in the service, which promoted equality.
- The registered manager told us staff had built established relationships with people. They said each person's individuality, and personal preferences were respected.
- Staff interacted with people in a friendly, caring and respectful manner. One staff member welcomed a person home and said, "Go and get yourself sorted and comfortable [name of person] and I'll be up to see you."
- People were complimentary about the staff. Specific comments were, "The staff are great" and, "Before I came, I'd heard rumours that the staff were very caring and polite. It's very true." Another person told us staff were very supportive when they had experienced a bereavement.

Supporting people to express their views and be involved in making decisions about their care

- People were able to direct their support and follow their preferred routines. This included calling staff for assistance when they wanted to get up or have a shower.
- People were involved in the development and review of their support plan. One person told us, "When I came here, we did the whole care plan together." There was a format titled, "About Me", which described areas of importance and how best to support the person.
- Systems were in place to enable people to give their views about the service. This included discussions during their one to one time with staff and regular reviews of their support.

Respecting and promoting people's privacy, dignity and independence

- People's rights were promoted. There was a strong focus on promoting independence and respecting people's flat as their own home. One member of staff said, "We have to remember we're a guest so need to be invited in."
- Information such as Dignity at Work policies were available for staff reference if required.
- Staff were knowledgeable about promoting people's rights. One staff member told us, "I thought one person looked so much better than they had done for a while, so I gave them a mirror to see themselves. Their smile was great, it really gave them a boost and promoted their dignity."
- The registered manager told us one person's independence had significantly increased since being at the service. They said another person received limited staff support and chose to spend large amounts of time on their own in their flat. The registered manager and staff told us this person's choices and independence

were respected.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs. At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 received a personalised service that was tailored to their needs. They were able to follow their preferred routines and request staff assistance when needed. Personal goals were discussed, and action taken to address these.
- Staff responded to people's requests in a timely manner.
- Staff told us they enjoyed the ethos of supporting living. They said it enabled people to live their lives as they wanted to, with any support they needed. One member of staff gave an example of a person enjoying a night out and returning in the early hours. The person asked staff to support them to go to bed when they were ready.
- Each person had a detailed support plan, which reflected their needs and preferences. The information was well written and up to date. The cover of the plan reflected things of importance to the person.

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.

- The service was meeting this standard as people had varying support to meet their communication needs. One person effectively used a communication board, to communicate their needs.
- Information including surveys and the complaint procedure were available in "easy read" formats. This included large text and pictorial forms.

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

- People had several hours each week, funded as part of their support, to meet their social needs. People were able to choose how they used this time. This included going into town, to the theatre or out for a meal.
- Some social activities were arranged in the service and people were encouraged to follow their hobbies. One person for example, liked to have a hand massage and their nails painted.
- People were encouraged to have visitors when they wanted them, in line with their tenancy agreement.

Improving care quality in response to complaints or concerns

- People had a copy of the complaint procedure and knew how to make a complaint.
- The registered manager told us people were encouraged to raise a concern if they were not happy with their service. One person told us they had recently done this. They said they were listened to and the situation was being monitored.

- The registered manager and staff told us any concerns were addressed quickly before they escalated. This gave people confidence and showed they would not be discriminated against for raising a concern.

#### End of life care and support

- The registered manager told us end of life care and support was discussed with people. As a result, one person had planned their funeral and had purchased a funeral plan.

# 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager was clear of their responsibilities and had a good overview of the service. They were involved on a day to day basis and undertook people's support as part of their role. However, they were classed as the deputy manager and there were no senior staff to which the registered manager could give additional responsibility. In addition, there was no contingency plans in place to respond to the registered manager's possible absence from the service.

We recommend consideration is given to the current management structure and contingency plans related to the possible absence of the registered manager.

- There were audits undertaken at varying frequencies to assess the safety and quality of the service. This included areas such as the environment, first aid boxes, people's health care plans and staff training.
- The outcomes of the audits were added to an electronic system and a compliance action plan was generated, if shortfalls were identified. The action plans had to be completed, before the audit could be closed on the electronic system. This ensured appropriate action was taken and not missed.
- Senior managers visited and undertook quarterly audits, to assess and monitor the service. Records of the visits were maintained, and clear action plans were in place.

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

- The registered manager had strong values and was committed to ensuring people received a good standard of support. They said they aimed to be, "Positive, warm and empathetic", when communicating with people and the staff team.
- People and staff were complimentary about the registered manager and their leadership style. One person said, "[Name of registered manager] is so supportive." A member of staff told us, "I have a lot of respect for [name of registered manager] We're lucky to have her. She's smashing and we're very protective of her."
- People and staff told us the registered manager was readily available and would spend time with them when required. One person told us, "[The registered manager] pops by to see how I am, or I can come down to the office."
- The registered manager and staff gave us examples of good outcomes for people. This included one person gaining weight which enhanced their health and wellbeing, and another who had significantly enhanced their independence.

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

- The registered manager told us they were open and transparent and would apologise if anything went wrong in the service. They said they would investigate and readily address and report any shortfall.

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

- People were encouraged to be involved and give their views about the service. This included one-to-one discussions, tenant meetings and surveys. The registered manager and staff told us people were also involved in the interviewing of new staff.
- Events, such as BBQs, were arranged with the aim of bringing people together. People's families and those within the local community were invited to attend. This promoted the social occasion and development of relationships.
- The registered manager told us they aimed to support local businesses. This included local shops and pharmacies. Staff confirmed this and said one person went to a coffee shop, after attending a GP's appointment.
- There was a monthly newsletter, which was based on people's views and suggestions.

Continuous learning and improving care

- The registered manager told us they were always looking at ways the service could progress and improve. They said their current focus was investigating ways in which one person's goal of sailing could be achieved.
- Staff told us the registered manager encouraged involvement and was open to suggestions to improve the service. One member of staff told us, "Ideas are always tried. They may not work but at least we're listened to and things are tried."
- Improvements had been made to the garden. A new patio had been laid to make the area safer and more pleasant.

Working in partnership with others

- The registered manager told us they worked with other departments and managers within the organisation, to share ideas and gain support.
- Established links had been built with other professionals. The registered manager told us they had asked the Fire and Rescue Service to visit to talk to people, as risks regarding fire safety had been identified. This had enabled suggestions to be adopted to promote safety.