

# Oaklands Support Limited

# Chestnut House

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Chestnut House is a supported living service for people living with a range of care needs, including mental health and learning disability needs. It operates two shared houses where people have access to their own flat and share communal areas. Other people were supported in individual homes. The service was supporting 27 people at the time of the inspection.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

People were supported by staff who understood their role in protecting them from the risk of harm. People were supported to take reasonable risks, so that they could do things they enjoyed and be part of the local community. Environmental risks were assessed and managed to enable people to keep safe. Accidents and incidents were reviewed to help identify lessons learnt and these were shared with staff. Enough trained staff were available to support people.

Where needed people were supported in a safe way to take their prescribed medicine. The staff's suitability to work with people was checked before they commenced employment. People were protected from the risk of infection as staff followed government guidelines regarding Covid 19.

Checks were undertaken to monitor the quality and safety of the service. The views of people using the service and their relatives, staff, and professionals were gathered to help improve the service. The registered manager and staff team worked well with health, social care and criminal justice professionals.

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.

Based on our review of the Safe and Well Led key questions, the service was able to demonstrate how they were meeting some of the underpinning principles of Right support, right care, right culture. The leadership of the service was provided in an open and inclusive way. This supported a culture that enabled people to live inclusive and empowered lives. People confirmed they were supported to be as independent as they wanted to be and were empowered to make decisions to achieve positive outcomes.

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 22 December 2020).

#### Why we inspected

The inspection was prompted in part due to concerns received about risk management. A decision was made for us to inspect and examine those risks. As a result, we undertook a focused inspection to review the key questions of safe and well led only. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the Safe and Well Led sections of this full report.

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 remains good. 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 Chestnut House 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?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# Chestnut House

## 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

This inspection was carried out by one inspector.

Chestnut House provides care and support to people living in several 'supported living' settings so they can live as independently as possible. Peoples 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 a short period of notice so arrangements could be made for the inspector to visit the office location and work in a COVID-19 safe way.

#### 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 took this into account when we inspected the service and made the judgements in this report. We reviewed information we had received about the service since the last inspection. We received feedback from the local authority. We used all this information to plan our inspection.

#### During the inspection

We spoke with four members of the management team. This included the registered manager, service manager, a quality assurance lead 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 a variety of risk assessments and positive behaviour support plans for people using the service. We looked at three staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We spoke with four people who used the service and two people's relatives about their experience of the care provided. We spoke with a further three members of staff and contacted two students from the local university who had recently completed a placement at the service. We continued to review records remotely. This included training data and quality assurance records.

# 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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

### Preventing and controlling infection

- We were assured that the provider was using PPE effectively and safely. Staff practice reflected the government guidelines.
- Staff confirmed that they wore face masks in all relevant settings and completed lateral flow and PCR tests weekly. Where staff had not received both vaccines to protect them from Covid 19, they completed a lateral flow test before each shift.
- The registered manager told us there was a stock of PPE, including hand sanitiser available to staff and the staff we spoke with confirmed this.
- On the day of the inspection government guidelines were followed when we arrived at the office. This included reviewing evidence of the negative lateral flow test and PCR test we had taken prior to the inspection. All staff working in the office wore face masks and followed government guidance.

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

- A safeguarding policy was in place that referred to and included the local authority procedure.
- Staff had received training about how to protect people from abuse and understood the procedure for reporting concerns.
- The provider acted when they were concerned for people's safety and reported these to the appropriate professionals.

### Assessing risk, safety monitoring and management

- We saw that information was sought to assess people's needs before they began using the service. This included staff visiting the person before their move. Also, when possible, providing a transitional period for the person, to meet the staff team and if relevant to meet other people they would be living with. This practice was dependent on each person's needs. One person's relative confirmed that this was not suitable for their loved one. They confirmed that this was respected and the move to their new home was managed well.
- Risks were continuously reviewed, and assessments updated as needed. The service focused on supporting people to make changes in their behaviour, to enhance their quality of life.
- Positive behaviour support plans were in place to help people lead a meaningful life and learn new skills without unnecessary restrictions.

### Staffing and recruitment

- People received care from sufficient numbers of suitable staff. Where people needed more than one staff member to support them this was provided.

- The provider's recruitment processes were in place and followed. This ensured people were supported by staff who had undergone suitable checks for the job role.
- Staff were supported with their training and development to enable them to meet people's needs

#### Using medicines safely

- Medicines were managed safely. Medicine administration records were completed when staff supported people to take their medicine.
- Staff were trained in medicines administration and their competency assessed before they supported people.
- Medicines administration records were audited regularly, to ensure any errors were addressed and to check people received their medicines as prescribed.

#### Learning lessons when things go wrong

- Incidents were reviewed by the management team, so that action could be taken to minimise reoccurrence.
- Staff knew how to report and respond to incidents. Staff told us that a debrief meeting was undertaken following an incident. This gave them an opportunity to discuss, reflect and review what happened, what led to the incident and any changes needed in the person's support plan. Staff confirmed that they felt supported by the management team.
- We reviewed a positive behaviour support plan for a person that had gone into crisis and needed intensive support. Information in this plan showed that during this period the staffing levels increased, to enable staff supporting the person to take regular breaks. This in turn enhanced the support provided to the person. The staff team also worked with a specialist team to support this person and enable recovery.



# 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.

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

- A registered manager was in post who was committed to promoting people's rights. They were supported by a service manager and a quality assurance lead.
- People were supported and encouraged to lead full lives and achieve their goals. One person told us, "The staff help me with cooking, cleaning and help with finances which is very helpful to me. They also support me when I go to the gym and the pub. I am really happy with the support." Another person told us, "The most important factor is the communication which is very good. Everything is understood and my rights are respected. Staff are positive with me and respect my privacy. The staff help me with my finances and support me with medication and with cooking."
- Staff told us they felt safe at work and supported by the management team. One said, "I always have someone to go to for support. Our needs are important to them [management team] and they encourage us to air our views. There is an on call for staff which is team leader first who can escalate to a manager if needed." Another staff member said, "This is the best place I've ever worked. I could ring the registered manager directly, if I needed to. I feel very supported."
- We reviewed feedback from students that had recently completed a placement at the service. They provided positive feedback. One stated there was a positive atmosphere when on placement that enabled them to learn and develop.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Policies and procedures were in place, accessible to staff and followed.
- The registered manager was clear about their role and responsibilities. They had submitted statutory notifications as required.
- There was a good skill mix of staff who were clear about their roles and responsibilities and confirmed they received regular support from their line managers.
- Audits were completed regularly to inform on the quality and safety of the service. Actions were taken as needed to address any areas where improvements were identified.
- Reflective learning was in place to enhance the support people received.

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

characteristics; Working in partnership with others

- The provider sought the views of people using the service, their representatives and professionals involved in people's care. This information was reviewed, and actions taken as needed to enhance the support provided.
- Feedback from relatives was positive. One relative said, "I'm very happy with the service. My relative is supported well. The communication is fantastic, very thorough. The registered manager really listens to your views and really seems to care." Another relative told us, "My relative has never been happier or healthier. The registered manager has got the staff right for my relative, they are so compatible. They have sorted out their diet so that they eat better food. The lines of communication are clear. I am fully involved and kept up to date with everything."
- People's views were used to develop and review the support provided to them.
- The provider worked with a range of agencies to enhance the support provided to people.
- We reviewed recent feedback from a professional involved in a person's care. They said that when faced with difficult situations the staff team had developed some amazing strategies to overcome these challenges. They went on to say the staff were a great hard-working team and had been a pleasure to work with.