

R-H-P Outreach Services Ltd

R-H-P Outreach Services - Meopham Road

Inspection report

45 Meopham Road
Mitcham
Surrey
CR4 1BH

Tel: 07958070028

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02 December 2021

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23 February 2022

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

R-H-P Outreach Services - Meopham Road is a residential care home providing care and accommodation to people living with mental health needs. The service can support up to five people. At the time of the inspection there were three people living at the service.

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

People were supported to stay safe and maintain their health and well-being. They were supported by enough staff who knew them well and had been safely recruited. Staff helped people take their medicines in a safe way. The environment was clean and robust infection control procedures were followed.

People were involved in planning their support and this was tailored to their own needs and wishes. They knew how to raise any concerns and complaints about the service and felt able to talk to the registered manager about day to day issues.

The registered manager regularly checked and assessed the quality of the care and support provided to people. They worked to ensure people received high quality personalised care, and to achieve the best possible outcomes. Health and social care professionals said the service communicated well with them and provided a good quality of support to their clients.

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

Rating at last inspection

This was the first inspection of this service.

Why we inspected

This service was registered with us in May 2019 and this was the first inspection.

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.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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.

R-H-P Outreach Services - Meopham Road

Detailed findings

Background to this 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

One inspector carried out the inspection.

Service and service type.

R-H-P Outreach Services - Meopham Road 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.

Notice of inspection

This inspection visit took place on 2 December 2021. We gave the registered manager 48hours notice of our inspection.

What we did before the inspection

We reviewed information we held about the service, including details about incidents the provider must notify us about, such as abuse or when a person is injured. We used all this information to plan our inspection.

The provider was asked to complete a provider information return prior to this inspection. 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. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with two people who used the service, two members of care staff and the registered manager. We reviewed two people's care records and other records relating to how the service is run.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We also received written feedback via email from four involved health and social care professionals.

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

- Systems and processes were in place to protect people from the risk of abuse. Staff we spoke with had received training and knew how to recognise signs of abuse and how to report safeguarding concerns. A staff member told us, "I have no concerns. The manager makes sure they are safe."
- People said they felt safe and were treated well by staff. A person said, "The staff are very laid-back. I feel listened to here."
- The registered manager understood their responsibility to refer matters of concern to the local safeguarding team.

Assessing risk, safety monitoring and management

- Risks to people were assessed, monitored and managed to help them to stay safe. The service demonstrated a culture promoting positive risk taking and building people's independence.
- Measures were in place to mitigate risk with clear guidance on how to support people and keep them safe whilst promoting their independence. For example, staff provided support to people in activities such as cooking, using local shops, facilities and public transport. A staff member reported, "We make sure people are safe but give them independence."

Staffing and recruitment

- People said there were enough suitable staff to care for them safely. Where people were assessed as needing support to meet their care needs and when going out in the community, this was provided. We observed people were comfortable with staff and clearly had built positive relationships.
- People told us they could access support from staff when they needed it and there was a staff member for support at night in an emergency.
- Systems for recruitment were safe. All pre-employment checks had been carried out including Disclosure and Barring Service (DBS) checks, identity checks and references. The DBS carry out a criminal record and barring check on individuals who intend to work with children and vulnerable adults, to help employers make safer recruitment decisions. This meant people were protected from the risk of being supported by staff who were not suitable to work with them.

Using medicines safely

- People were receiving their medicines safely and as prescribed.
- Staff were clear about their responsibilities in relation to medicines and records were consistent and accurate. Only staff who had been trained and assessed as competent were able to administer medicines to people.

- Some people were prescribed PRN (as needed) medicines. There was clear guidance for staff in when to administer PRN medicines. This meant people had access to their prescribed medicines when they were needed.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Care homes (Vaccinations as Condition of Deployment)

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19, unless they have an exemption or there is an emergency. We checked to make sure the service was meeting this requirement. We found the service had effective measures in place to make sure this requirement was being met.

Learning lessons when things go wrong

- The registered manager regularly monitored accidents and incidents. Records kept were of a good quality and documented any actions taken and lessons learnt.

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's needs were assessed prior to them receiving care. Assessments included people's health, their support needs, their personal relationships and their likes, dislikes and hobbies. This information had been used to plan people's care and support in a person-centred way. A health and social care professional praised the service's ability to be "Flexible and creative in their approach to meet [person's] needs. I perceive this approach to be person centred as it keeps them at the centre of all decisions which are made in partnership with, as opposed to decisions made for and about them."

Staff support: induction, training, skills and experience

- People received care and support from competent trained staff. A person using the service told us, "They take time with you. They work at your pace."
- New employees were required to complete an induction including mandatory training. Those new to care were supported to complete the Care Certificate; a nationally recognised, work-based, vocational qualification. Online training systems helped staff to keep up to date with their training and access any additional courses to help them meet people's needs. A staff member said, "I have to keep my training up to date."
- Staff received monthly supervision and said they were able to approach the registered manager for advice and guidance at any time. A staff member commented, "The registered manager will respond quickly. We catch up almost every day and have supervision every month."

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

- Staff assisted people to maintain good nutrition and hydration, encouraging people to cook and make healthy eating choices. A person said, "They help you cook your own meals. I have learnt some new cooking skills." One person's support plans included detailed picture guidance on how to support them to make a meal of their choice.

- A health and social care professional commented, "I am also really delighted about their progress in daily living skills, such as...making snacks and participating in making meals."

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

- Staff supported people to attend health appointments as required. A health and social care professional commented, "I have been satisfied with the support offered to [person] at Meopham Road."

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 being supported in the least restrictive way. The registered manager and staff understood their responsibilities for gaining consent and upheld people's rights to have choice and control over their lives. One person told us, "I can go out when I want to."

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 said the registered manager and staff were kind and treated them well. A person said, "Staff are respectful to me." Another person commented, "The staff are nice here." People using the service had built trusting relationships with staff. We observed people were confident talking to and requesting help from the registered manager and staff who responded promptly to their needs.
- Staff respected people's individuality and supported them in a non-discriminatory way. Staff completed equality and diversity training as part of their training.

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

- People said, and care records confirmed, they were involved in making decisions about their care and support.
- Support plans contained detailed information about people's background, history and what was important to them. This meant staff were able to gain an understanding of people and engage in meaningful interactions with them.

Respecting and promoting people's privacy, dignity and independence

- People were supported and encouraged by staff to gain greater independence, learning to do their own cooking, shopping and accessing their community without staff with them

Is the service responsive?

Our findings

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

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

- Care plans were personalised and regularly reviewed. They were detailed, well written and addressed the support required and any areas of care the person was able to manage independently.
- People using the service told us their support needs were being met and that they liked living at the service.
- People's support plans gave staff guidance on how to keep people well and recognise when they were in need of further support or intervention. Health and social care professionals told us that the service worked well to respond to their client's individual support needs. One professional commented, "[The registered manager] has worked with and managed some of our service users for a number of years, kept them well and out of hospital. We appreciate her service."

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 carer's.

- Other methods of communication were used such as picture information.
- Important information such as how to complain and other guidance could be made available in easy read and other formats for people using the service.

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 were supported to maintain contact with family and friends. One person told us how they had been helped to be more independent and maintain a relationship that was important to them. Another person was being supported by staff to learn and use local public transport networks that enabled them to be more independent and pursue their own interests.

Improving care quality in response to complaints or concerns

- The service had a policy and system in place to deal with complaints or concerns appropriately.
- The registered manager told us they had not received any complaints. People using the service told us they felt listened to and any issues were discussed and appropriately addressed.

End of life care and support

- At the time of the inspection, no one supported by the service was receiving end of life care. The registered

manager told us they would work closely with other healthcare professionals, including GPs to support people at the end of their life.

Is the service well-led?

Our findings

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

- People using the service spoke positively about the registered manager and the quality of support. One person told us, "[The registered manager] is very patient and caring". A health and social care professional commented "[The registered manager] leads from the front and I would not hesitate to place another service user in her care."
- Staff told us how they felt supported by the registered manager. A staff member said, "You can communicate with her. She is always there for you."
- People were supported to achieve positive outcomes, such as maintaining independence, their health and wellbeing and pursuing their own interests. One person told us, "The best care home I have been in."

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

- The provider had extensive systems and processes in place to promote person-centred care and to empower staff. These included audits and checks on aspects of the care, support and environment, which were used to drive improvements.
- The registered manager was committed in delivering their role effectively. They understood their responsibilities under their CQC registration.
- Staff we spoke with were clear about their roles. One staff member told us they had regular formal supervision with the registered manager and were able to get guidance from her at any other time should they require it.

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 understood the need to be open and honest when things went wrong. They reported all concerns to the relevant people and organisations and shared outcomes with people, their relatives and the staff team. They were open with CQC about plans for continued improvements.
- Health and social care professionals were happy that the registered manager informed them of any incidents or accidents in a timely manner and took appropriate action to keep their clients safe. One professional commented, "The communication between staff and the clinical team has been good."

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

- Regular staff meetings took place to ensure information was shared and expected standards were clear.
- The provider sought to capture views from people, relatives, professionals and staff through regular

consultation. This included informal feedback through day to day discussions and more formal feedback through reviews and satisfaction surveys.

Working in partnership with others; Continuous learning and improving care

- The staff team worked with a variety of health professionals to ensure people's needs were being met.
- The registered manager monitored the quality of service delivered through audits and checks and survey feedback. They were keen to maintain a service providing high quality care and positive outcomes for people.