

Rehability UK Community Ltd

Rehability UK Berkshire

Inspection report

41-43 St Georges Road
Reading
Berkshire
RG30 2RL

Tel: 01183242525
Website: www.rehability.co.uk

Date of inspection visit:
25 October 2023

Date of publication:
17 November 2023

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

Rehability UK is a supported living service which provides support to up to 12 people who live with a learning disability in their own flats. There is an office on the same site as the flats from where the service is managed. Staff provide an overnight 'sleep in' service at the location.

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. At the time of the inspection there were 8 people living in the flats, 4 of whom were receiving the regulated activity of personal care.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

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

The service was able to demonstrate how they were meeting the underpinning principles of right support, right care, right culture.

Right Support:

Staff supported people to engage in their preferred activities to enable them to lead fulfilling and meaningful everyday lives. People had a choice about their living environment and were able to personalise their rooms. Staff communicated with people in ways that met their needs. Staff supported people with their medicines in a way which met their health needs.

Right Care:

People's care, treatment and support plans reflected their range of needs to promote their wellbeing and enjoyment of life. People's care plans contained personalised risk assessments which supported people to take positive risks.

Right Culture:

People received good quality care, support and treatment because staff worked with specialists to meet people's needs. Staff knew people well and supported them to live a life of their choosing. Staff continually acted as advocates for people to promote positive outcomes for them.

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

Rating at last inspection

The last rating for this service was good (published 9 August 2017).

Why we inspected

This inspection was prompted by a review of the information we held about this service and the length of time since the last inspection.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained 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 Reability UK Berkshire on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Rehability UK Berkshire

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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 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 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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and

improvements they plan to make. We reviewed information we had received about the service since the last inspection. We used all this information to plan our inspection.

During the inspection.

We spoke with the registered manager, operations manager, deputy manager and 4 members of support staff. We observed people receiving care and support. We also spoke with 3 relatives of people who lived at the location.

We reviewed a range of records. This included 3 people's care and support plans, medicines administration records for the same 3 people, 3 staff files, the staff supervision matrix and staff meeting records. A variety of records relating to the management of the service were also reviewed.

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 we rated this key question good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of harm and abuse by trained staff.
- Records showed staff followed the provider's policies to report any concerns to the relevant authorities and to the CQC.
- People's relatives felt their loved ones were safe. One relative said, "There is a plan...to maintain her safety. Her flat has been adapted to meet her support needs".

Assessing risk, safety monitoring and management

- Risks to people were effectively managed.
- People's care plans contained detailed, personalised risk assessments which supported them to take positive risks to enhance their wellbeing. For example, one person wished to use a vape. Staff had worked with the person to make a personalised support plan to use the vape whilst minimising the risk to the person.
- Risk assessments were in place for a range of areas including epilepsy, behaviours which may challenge and sleeping. These demonstrated staff applied a range of personalised strategies to assess and manage risks for people to support them to lead enjoyable lives.

Staffing and recruitment

- People were supported by sufficient numbers of suitably qualified staff.
- Staff were recruited safely. We saw each staff member's records included two references, their right to work in the United Kingdom was checked, any restrictions on work visas were identified and a criminal record check was completed. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. This information helps employers make safer recruitment decisions.
- Staffing levels were determined based on people's support needs. A staff member told us people received continuity of care and agency staff were not used.

Using medicines safely

- People's medicines were managed safely.
- Protocols were in place for the administration of 'as required' medicines.
- Appropriate arrangements were in place for medicines ordering, storage and stock checking.
- People's medicines administration records (MARs) had been accurately completed by staff and regular medicines audits were in place.
- There was a policy in place for addressing medicines errors which included staff reflections on these to

prevent recurrences.

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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.

Learning lessons when things go wrong

- People were supported by staff who reflected on practice to identify improvements.
- Incident and accident logs showed staff reviewed events and identified triggers and contributory factors to prevent recurrences and promote people's safety.

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 we rated this key question good. The rating for this key question has remained 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; managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager and staff team shared a vision to develop and maintain a service which achieved good outcomes for people and promoted their independence.
- People received personalised care which met their needs and preferences. People were supported to access enjoyable activities and had good relationships with caring staff.
- The registered manager maintained a detailed oversight of the service. Audits of different aspects of the service were incorporated into their service improvement plan, which was constantly reviewed. Actions were attributed to staff members with dates for completion.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- People were supported to give their feedback about the service at regular intervals.
- People's relatives felt the registered manager and staff were approachable and responsive. Relative's comments included, "We are often emailing each other...we talk about issues as they come up. We are in regular contact and have at least monthly meetings. They act on what we say", "We get a questionnaire annually. I recently sent positive feedback about some staff. He has a good rapport with staff that interact with him, and overall he is in a happy place" and, "We have good relations. If I text [registered manager] comes back to me. I can say anything. I trust her".
- Staff meetings were used by the registered manager and senior team to reflect on practice and raise any issues which needed to be addressed.
- Staff told us the registered manager and senior team were supportive, approachable and responsive to any queries or issues they raised. One staff member said, "It's been great". Another staff member told us, "They've already been improving a lot so it's quite good".

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

- The registered manager understood their responsibilities under the duty of candour when something goes wrong.
- The provider had a procedure for investigating and responding to complaints and concerns which were raised about the care provided.

Working in partnership with others

- Staff worked in partnership with professionals from health and social care to achieve good outcomes for people.
- Staff had worked closely with one person's psychiatrist and GP to review and amend their medicines regime to prevent the person being given medicines which were not beneficial to them.
- People's records contained evidence of staff liaising with a number of professionals to promote their health and wellbeing, including social workers, speech and language therapists and specialist nurses.