Reamcare Limited

The Porthouse

Inspection report

141 Cheam Common Road
Worcester Park
KT4 8SY

Tel: 02082243495

Date of inspection visit:
01 May 2019

Date of publication:
05 June 2019

Ratings

Overall rating for this service	Inspected but not rated

Is the service safe?	**Inspected but not rated**
Is the service effective?	**Inspected but not rated**
Is the service caring?	**Inspected but not rated**
Is the service responsive?	**Inspected but not rated**
Is the service well-led?	**Inspected but not rated**

Summary of findings

Overall summary

About the service:

This service provides care and support to people living in a 'supported living' setting, so that they can live in their own home 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. At the time of our inspection visit the service was supporting one person.

People's experience of using this service:

The person and their relative were satisfied with the quality of care provided by the service. There were systems in place to make sure there was always enough staff working at the service to help keep the person safe and meet their needs. The person was protected from the risk of abuse and felt safe.

Care was planned with the person and their relatives' input. Staff knew the person well and understood the support the person needed to stay safe and healthy. Staff liaised well with external health and social care professionals as well as the person's relatives. This helped the person to receive individually tailored care which met their needs.

Staff were caring and friendly; they had built a good rapport with the person. Staff provided care and support in a way which maintained the person's independence, privacy and dignity. The person was treated with respect and involved in making decisions about their care.

The person was given the information they needed about their care in a way they could understand. The person had regular opportunities to give their views on what they did and did not like about the way their care and support was provided..

The person received a sufficient amount to eat and drink, and their meals reflected their food preferences. The person was supported to spend their time involved in enjoyable, age appropriate activities.

Appropriate checks were carried out on staff before they were allowed to work with the person. The person was supported by staff who received relevant training, supervision and performance review which helped staff to provide effective and appropriate support.

The registered manager was passionate about providing high quality care which helped people to develop their skills and achieve their goals. There were systems in place assess and monitor the quality of care provided.

For more details please see the full report.

Rating:

This was the first inspection of this service since it registered with the CQC on 2 May 2018. We did not give the service a rating. This was because there was insufficient evidence available to make a judgement and award a rating

Why we inspected:

This was a planned inspection in line with our inspection schedule..

Follow up:
We will continue to monitor the service through the information we receive. We will inspect in line with our inspection programme or sooner if required.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe? Inspected but not rated.	**Inspected but not rated**
Is the service effective? Inspected but not rated.	**Inspected but not rated**
Is the service caring? Inspected but not rated.	**Inspected but not rated**
Is the service responsive? Inspected but not rated.	**Inspected but not rated**
Is the service well-led? Inspected but not rated.	**Inspected but not rated**

The Porthouse

Detailed findings

Background to this inspection

The inspection:

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 201

Inspection team:

This inspection was carried out by one inspector.

Service and service type:

The Porthouse is a supported living service. It provides personal care and support to people living in their own home. 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:

The inspection took place on 1 May 2019 and was announced. We gave the registered manager two days' notice of the inspection because it is a small service and we needed to be sure the registered manager would be available to speak to us.

What we did:

Before our inspection we reviewed information we held about the service. We looked at information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

We visited the service's office and spoke with the registered manager and a member of staff. We reviewed one person's care records, two staff files and other records relating to the management of the service including the provider's policies and procedures.

After the inspection, we spoke with one person and a staff member over the telephone. We also obtained feedback from a relative and a social care professional who had regular contact with the person using the service and staff.

Inspected but not rated

Is the service safe?

Our findings

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

Inspected but not rated.

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

- The person living at The Porthouse told us they felt safe living there and with the way they were supported by staff.
- Staff had been trained in how to protect people from abuse.
- Staff spoke knowledgably about how to recognise the signs of abuse and how to report any concerns.
- A safeguarding adult's policy was in place which staff were familiar with. There had not been any safeguarding concerns raised since the provider registered with the CQC.

Assessing risk, safety monitoring and management

- The person's care was planned to minimise the risk of avoidable harm.
- An assessment was undertaken when the person started using the service to identify any risks to their safety.
- Staff carried out additional assessments when there was a change in the person's routine or participation in new activities. For example, there were risk assessment and management plans in place in relation to the person trampolining.
- Staff had detailed guidance on how to manage those risks.
- Staff were knowledgeable about how to support the person to maintain their independence whilst also ensuring they were safe.

Staffing and recruitment:

- Staff had been recruited using safe recruitment practices.
- Appropriate checks were carried out before staff began to work with the person including their right to work in the UK, criminal record checks and checking they were physically and mentally fit to carry out their role.
- There was sufficient staff to support the person safely and meet their needs. The staffing arrangements were flexible enough to ensure that replacement staff were available if a staff member was off through sickness or other unplanned event.

Using medicines safely:

- Staff responsible for giving the person their medicines had been trained to do so.
- The person's care plans contained detailed information on the medicines they had been prescribed, and

the medicines were reviewed regularly by external healthcare professionals.
•□Records confirmed the person received their medicines as prescribed.

Preventing and controlling infection:

•□The person was protected from the risk and spread of infection.
•□The registered manager and staff followed current guidance about infection control.
•□Staff supported the person to keep their home clean.

Learning lessons when things go wrong:

•□There had not been any accidents or incidents.
•□Systems were in place to record, review and analyse any accidents and incidents.
•□Staff understood their responsibility to record and report accidents and incidents

Inspected but not rated

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.

Inspected but not rated.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law:

•□The registered manager carried out a detailed assessment of the person's needs before they began to use the service. The assessment process continued after the person began to use the service.
•□These assessments formed the basis of the person's care plans. The care plans were thorough and reflected best practice guidance.
•□Care plans were designed to achieve effective outcomes for the person.

Staff support: induction, training, skills and experience:

•□Staff received an induction, training, supervision and appraisal.
•□Staff had the opportunity to obtain further qualifications relevant to their role, as well as to meet the specific needs of the person.
•□Staff had the knowledge, skills and experience to provide effective care to the person.
•□Staff felt supported in their role and able to approach the registered manager for guidance.

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 with appropriate legal authority. We checked whether the service was working within the principles of the MCA.
• The registered manager and the staff we spoke with were aware of their responsibilities under the MCA.
• Staff gave us examples of how they made sure the person was involved in decisions about their day to day care.

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

•□The person was supported to have enough to eat and drink, and had a balanced diet.
•□The person decided what they wanted to eat and when.
•□The person was satisfied with the quality and amount of food they received.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other

agencies to provide consistent, effective, timely care:

•□Care plans contained health care information which was useful to external healthcare professionals. This included the person's personal details, their communication and healthcare needs and how healthcare professionals should best approach and support them.
•□Staff supported the person to maintain good health by ensuring they attended appointments with external healthcare professionals.
•□Staff followed the recommendations of healthcare professionals involved in the person's care to make sure the person received appropriate and consistent care.

Inspected but not rated

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.

Inspected but not rated.

Ensuring people are well treated and supported; respecting equality and diversity:

- The person told us they liked the staff and the way they were treated. The person sounded very happy and relaxed when we spoke to them.
- A relative told us the, "I am happy with the staff. [The person] has everything [the person] needs."
- The person's care was planned and provided in a way which took into account and reflected their age and gender.
- Staff spoke to the person with respect and were patient and caring.

Respecting and promoting people's privacy, dignity and independence:

- Relatives told us staff encouraged the person to be as independent as they were able to be. One family member told us, "I'm pleased with the progress [the person] has made. The staff encourage [the person] to try and do things. and [the person] always seems to be busy doing different activities"
- Staff supported the person to maintain relationships with their family.

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

- Staff supported and encouraged the person to make decisions about their care as part of the care planning process and in making day-to-day decisions such as what they wanted to wear and to eat.
- Care plans recorded the person's views and how they wanted to be supported. This included information about their interests and people who mattered to them so that staff were able to better understand people's support needs.

Inspected but not rated

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

Inspected but not rated.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control:

- The person and their relative were satisfied with the way they were supported and the quality of care they received.
- Care plans reflected the person's preferences, routines and interests.
- The person was supported by a consistent staff team who knew the person and understood their care plan well. This helped the staff to provide personalised care.
- Care plans were designed to achieve effective outcomes and we saw that this goal was being achieved. One such example was that the person's communication skills had improved.
- The provider made sure that information the person needed to know was in a format they could understand. For example, some information such as menus were presented with pictures rather than words.

Improving care quality in response to complaints or concerns:

- The provider had not received any complaints but there was a system in place to record, investigate and respond to complaints.
- The person's relative knew who to make a complaint to if they were unhappy but told us they had not needed to. The person and their relatives were provided with details of how to make a complaint when they first started to use the service.

Inspected but not rated

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.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility:

- The registered manager and staff understood the importance of involving the person and their relatives in the care planning process as an aid to providing personalised care.
- The person's care plans were person-centred and contained lots of information about their personal history, likes and dislikes.
- The registered manager kept up to date with developments in adult health and social care. They had a good understanding of what was required to meet the regulations and their responsibility to be open and transparent when accidents or incidents occurred.
- Staff felt comfortable approaching the registered manager for guidance and support.

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

- Staff fully understood their role and responsibility to protect people from harm and provide high quality care.
- The provider had established systems to assess and monitor the quality of care people received.
- The registered manager conducted a variety of daily, weekly and monthly checks to make sure that people's care plans were accurate; staff training and supervision were up to date and that staff were providing care in accordance with the person's care plan.
- Staff assessed the risks relating to the health, safety and welfare of the person; these risks were well managed and monitored.
- The person's records were complete, detailed and up to date as were staff records.

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

- The person was involved in making decisions about their care and when necessary was supported by staff to do so.
- Staff supported the person to express their views during daily interactions.
- Regular staff meetings were held for the registered manager to share plans for the service and best practice with staff.