

Rehabilitation Education And Community Homes Limited

Reach Upton Court Road

Inspection report

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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

Reach Upton Court Road provides accommodation and support for eight people with learning disabilities. The service is close to Slough town centre and from some rooms, has a view of Windsor Castle.

People living at Upton Court Road were supported by staff who knew their needs well. Conversations with staff demonstrated they knew people's likes and dislikes and how they supported them to promote their independence. We saw good examples of how people were supported to take ownership in regards to aspects of their care in a safe way.

People were treated with dignity and respect. Staff were respectful and polite when speaking to people and engaged in conversations about things they enjoyed. There was laughter and joking throughout the day of our inspection.

People's safety was promoted through effective risk assessments and procedures in place. Staff had received effective training in order to help them support people with their social and health needs. People's medicines were managed safely and recruitment checks were in place to ensure staff suitability to work with people living at the service.

The service had a homely feel and people told us they felt happy living at Upton Court Road. There were good procedures in place to assess the quality of the service including the oversight of the day to day running of the service.

Staff told us they felt happy and supported in their roles by an effective management team. Staff were supported to undertake their roles effectively and to support people in an independent and person centred way.

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.

People were supported to access and receive their medicines in a safe manner.

Risk assessments highlighted potential risks to people and contained information on how to reduce risks to people living at the service.

Staff had received training on how to protect people from potential abuse. Staff were knowledgeable on how to escalate concerns to the proper authorities.

Is the service effective?

Good ●

The service was effective.

Staff received effective training including specific training in order to support people who lived at the service.

Where required, appropriate mental capacity assessments had been undertaken to ensure decisions were made in people's best interests.

People were supported to maintain their health via nutrition, hydration and professional appointments.

Is the service caring?

Good ●

The service was caring.

Staff knew people's needs well and supported them in a person centred manner.

People's independence and choice was promoted.

Advocacy services were sought for people where required.

Is the service responsive?

Good ●

The service was responsive.

People were supported to undertake a range of activities which they chose to participate in.

Care plans were detailed and comprehensive and gave a clear oversight of peoples current needs.

Complaints were managed appropriately within the service.

Is the service well-led?

Good ●

The service was well-led.

There was clear management oversight within the service.

Staff and people living at the service were complimentary about how the service was managed.

CQC had received appropriate notifications since the services last inspection.

Reach Upton Court Road

Detailed findings

Background to this 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 2014.

This inspection took place on the 7 April 2016 and was unannounced. We checked to see what notifications had been received from the provider since their last inspection in January 2014. Providers are required to inform the CQC of important events which happen within the service.

Before the inspection, we asked the provider to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We checked to see if we had received a PIR form from the provider. A PIR had been submitted in a timely manner.

The inspection was carried out by an inspector. On the day of our inspection, Reach Upton Court Road was providing support to eight people.

We spoke with the manager; team leader, operations manager, three staff and three people who used the service. We reviewed three care plans, medicine records and staff documentation including supervision and training records and copies of quality assurance documentation.

Is the service safe?

Our findings

People told us they felt safe living at Reach Upton Court Road. Comments included "I feel safe", "I feel pretty safe living here", and "I like being safe, X [staff member] makes me feel safe."

People were supported by staff who knew how to protect them from potential abuse. All staff had received training on how to safeguard adults and staff were able to tell us what safeguarding meant, and how they would respond and take action if they had concerns that abuse had taken place. We found safeguarding posters around the service which provided details of the protocol to follow if they were concerned that people were at risk of abuse. Where appropriate, the service had involved the local authority safeguarding team where a safeguarding alert had been raised.

Staffing levels were appropriate to the number of people living at the service. We were provided with four weeks' worth of rotas and found them to correspond with the staffing levels the provider had deemed as required. Throughout the day, staff were visible and supported people to undertake things they wanted to do, for example, accessing the local town, a dentist, cooking and any other requests people had. Staff told us they felt there were enough staff to meet people's needs.

People were protected from potential harm as the service ensured they assessed risks and put measures in place to alleviate or minimise the risk. For example, clear risk assessments were in place on how people wished to be supported and how staff needed to ensure they were kept safe. One example was of a person who was independent in visiting the community. Staff ensured the person carried their mobile phone with them at all times and made sure the person returned to the service by a certain time to ensure they were safe. Where people had specific health conditions which could cause them to be unsafe, risk assessments were in place. For example, guidance on the management of seizures. Staff were able to tell us what the risk assessment stated and what action they would take in the event of a seizure to ensure the person was safe. Where people had behavioural concerns that could result in self harm or potential harm of others, risk assessments were in place to provide guidance on how to minimise the potential risks.

Medicines were managed well within the service. Medicines were stored correctly in a locked room and cabinet and were administered by staff who were trained to do so. Staff supported people to be as independent as they wished with their medicines. We saw evidence that staff supported people to take their medicines out of the packet and involved people in counting and checking them, then signing for them to say they had taken them. MAR charts (Medicine Administration Records) were completed in full and PRN (as required) medicines were frequently stock checked and guidance was provided on the use of them. We counted some PRN medicines to check they were in line with the stock level check and found them to be correct. Where people required the use of specific medicines which were to be administered by trained staff, these were done and risk assessed.

We found there to be robust recruitment procedures in place. We looked at four recruitment files and found required checks were in place including evidence of conduct in previous employment, gaps in employment history explained and a satisfactory Disclosure and Barring Check (DBS) to ensure staffs suitability to work

with adults.

People were protected by an environment which had been assessed as safe for people to live in. The service had a keypad on the door to ensure people's safety. The rear garden was also enclosed to ensure people had a safe place to sit outside. Environmental issues associated with the service had been assessed to ensure their safety and a fire risk assessment and regular fire drills took place. All people living at the service had their own personal evacuation plan.

Is the service effective?

Our findings

Reach Upton Court is a large private home consisting of eight bedrooms, bathrooms, a wet room, a communal lounge, kitchen and diner and a private garden. We found the service was light, airy, clean and well maintained. People had free access to all areas of the home as they wished.

Before new staff were able to work, they were provided with an induction into the service. This consisted of shadowing senior staff members before lone working, and being signed off as competent by senior staff to undertake tasks. We spoke with one new staff member who told us about their induction and how it prepared them to work with people living at Upton Court Road. We also saw evidence the person was in the process of completing the new 'care certificate'. The care certificate is a certificate which new staff work towards to complete. The care certificate outlines 15 standards of care which staff have to provide evidence of their understanding and how they meet the standards.

We were provided with a training matrix for staff who worked at the home. We saw staff had received training in areas such as medicines, infection control, health and safety and safeguarding adults. Where required, staff had also received further training in the use of a PEG (Percutaneous endoscopic gastrostomy) feeding tubes and the use of rectal diazepam. Staff had also begun to undertake training on learning disabilities which they told us they found very interesting and useful. Staff told us they enjoyed the training provided and felt they had been trained appropriately to undertake their roles. Staff received effective supervision and annual appraisals to undertake their roles. We saw evidence of supervisions which had taken place. Staff told us they felt very supported in their roles and worked well together as a team. Some staff members had been in place for over three years.

We looked at how the service promoted people's rights under the Mental Capacity Act 2005. Staff were able to demonstrate how, when and why a mental capacity assessment may need to be undertaken and how they did this in line with the Act. We found copies of mental capacity assessments and meetings had been undertaken where required and involved relevant people and professionals to ensure any decisions were made in people's best interests. We also saw mental capacity assessments were regularly reviewed to ensure they were still relevant to people's current needs.

The Care Quality Commission (CQC) monitors the operation of the Deprivation of Liberty Safeguards (DoLS) which applies to care homes. Applications had been made to the local authority for all people who used the service. We saw where people's DoLS had or were due to expire; these were resubmitted to the local authority for approval. Evidence of best interest meetings in relation to any DoLS applications were recorded.

People were supported to maintain their health through appropriate nutrition and hydration. People had free access to the kitchen and were able to request or make drinks and snacks as they wished. Fresh fruit was also available for people if they wished. People's nutritional needs were assessed and where people were assessed at risk of weight loss, measures were in place to monitor and maintain their weight. People were supported to choose their meals and promoted to cook and make their own drinks were possible. One

person told us "I love the food. I love the fish and chips!"

People were supported to maintain their health through regular access to health professionals. On the day of our inspection, one person was supported to visit the dentist for some dental work. People living at the service had their own health passports which outlined clearly people's health needs and how they were to be supported. We saw evidence of regular appointments with GP's, professionals such as social workers, opticians and dentists. One person was having a discussion with the manager in regards to making an appointment to look at contact lenses. Appointments clearly outlined any actions from appointments which arose and what action was to be taken.

Is the service caring?

Our findings

People we spoke with told us they felt happy living at Reach Upton Court. Comments included "I like it here. Sometimes when people [staff] leave [to go home] it makes me sad", "I like being here and being safe", "It's much better than where I was before. It's close to town. I have a keyworker and the staff give me my own space and give me peace."

People were supported by staff who knew them well. On conversations with both staff and people who lived at the service, staff were able to tell us what people liked to do and what they didn't. When we spoke with people living at the service, they confirmed the information staff gave was correct. When we asked questions about people's specific needs, staff were able to tell us in detail about how they supported people and promoted their independence. For example, supporting people into the community.

Throughout the day we found staff engaged people in conversations about things they liked to do and assisted them to make daily choices, for example, what they would like to do for the day. People were able to access all areas of the home freely. For example, we saw people entering the communal kitchen to make snacks and lunch. Staff made themselves available to support people if they requested. The home had also been adapted to help people maintain their independence, for example, changing bathrooms to wet rooms so people could access them more easily at their own discretion. Staff also asked questions such as "Would you like me to put that in your room for you, or would you like to do it?"

Throughout the day we heard lots of laughing and joking. Staff appeared to have a good rapport with people living at the home and knew how to treat them with dignity, respect and privacy. For example, one staff member was very discreet when speaking with another staff member in regards to providing them support with the person's personal care. People appeared happy, smiling and comfortable. One person enjoyed giving staff 'high fives' which staff responded to and appeared to make the person happy.

The service had also thought of ways to promote people's independence and choice around their sexual needs. For example, assisting a person to visit a sexual health clinic to discuss safe practices and treating people with dignity and respect when they wished to have alone time. Some people living at the service had also been promoted to gain independence skills by undertaking volunteering roles in the community and setting up their own car wash business. We saw evidence of how staff supported another person who had a personal loss and how staff communicated the information in a way which the person could understand.

People were supported to use advocates if they wished. People's views on how the service was run were also sought through regular key worker meetings and resident meetings. At present, people were being supported to book their annual holidays with staff. People told us about the holidays they had been on before and how much they had enjoyed them. One staff member told us "Caring is about promoting people's choice and independence and involving them at all times." We found this to be happening at Reach Upton Court.

Is the service responsive?

Our findings

We looked at care plans for three people who lived at Reach Upton Court Road. We found people's needs had been assessed prior to moving into the service. Care plans were comprehensive and detailed aspects of people's care needs such as mobility, behaviour, communication, and support plans on how to support people in the way they wished. Care plans also detailed areas such as people's likes and dislikes, and what was important to them including friends and family. We found care plans were reviewed regularly to ensure they were reflective of people's current needs. Where specific support plans were required for health or behavioural needs, clear written guidance was provided on how the person was to be supported.

Every six months, a comprehensive review was undertaken involving the person, any healthcare professionals who were involved in the person's placement and staff at the home. These reviews gave a clear overview of what had happened in the person's life over the previous six months including any changes to health needs and/or wellbeing. Reviews also recorded what activities people wished to undertake within the next six months. Reviews gave a clear oversight of what had happened within the person's life during the last six months including social aspects, medical and health aspects and care aspects.

People were supported to undertake a range of activities both within the service and the outside community. Some people living at the service were involved in volunteering projects which they told us they enjoyed. People had also participated in gardening at the service. Other people attended local clubs and colleges to learn new skills and qualifications. One person had recently commenced a paper round which they were contemplating on continuing or not. On the day of our inspection, people were supported regularly into the local town and other areas. One person was supported to visit a hairdresser as this was very important to them.

We saw comprehensive handovers were undertaken between each shift to ensure staff were up to date with how people were that day and what was happening within the service. Staff also used a communication book to relay important messages to other staff in relation to people's care. We saw evidence of regular staff and resident meetings which allowed the service to gain feedback on how the service was run and how people felt about living at Upton Court Road.

Complaints were managed appropriately in the service. A complaints log recorded when complaints had been made and we found clear evidence of investigations and learning from complaints made. People living at the service were promoted to make complaints and complaints were a regular discussion at residents meetings.

Is the service well-led?

Our findings

People and staff were complimentary about the management of the service. At present, management consisted of the registered manager and a team leader. Comments included "X is a good manager. I've had little problems but he's really good", "X is the best boss I have ever had. He is very patient and always available when I need him" and "Both the manager and the team leader are good. They have really supported me."

Bi-monthly quality assurance checks were undertaken by the provider's operation manager to assess the quality of the service. This involved undertaking checks within the service around areas such as staffing, care plans, premises, medication and any accident or incidents which had occurred in the home. Where actions arose from audits, we saw action plans were in place and signed off when completed.

Regular auditing and assessments were undertaken within the home to ensure the environment was safe, for example, health and safety checks and auditing. We found management had clear oversight of the service and made themselves regularly available to both staff and people living at the service to discuss and concerns or issues. Both the manager and team leader had been working at Upton Court Road for over three years. They both demonstrated good knowledge and understanding of the running of the service and people's needs.

We found management was knowledgeable on meeting the required regulations and provided evidence of how they felt they met the five key questions we ask of services – "Is the service safe? Effective? Caring? Responsive? And Well-led? When evidence was asked for, it was provided promptly and in a clear format. The registered manager had also submitted a detailed PIR outlining the work the service undertook to answer the five key questions prior to the inspection.

The commission had received appropriate notifications since Reach last inspection in January 2014. The registered manager was aware of the requirement to inform the Care Quality Commission where a notification needed to be submitted.