

The Regard Partnership Limited

The Regard Partnership Limited - Tolworth Park Road

Inspection report

104 Tolworth Park Road
Surbiton
Surrey
KT6 7RH

Tel: 02082742747
Website: www.regard.co.uk

Date of inspection visit:
04 January 2017

Date of publication:
31 January 2017

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

The Regard Partnership – Tolworth Park Road is a care home for six people with learning disabilities who require personal care. There were four people living in the home at the time of our visit. Some people had limited verbal communication.

When we last visited the home on 13 May 2015 the service was meeting the regulations we looked at and was rated Good overall and in all five key questions.

At this inspection we found the service continued to be Good.

There continued to be enough staff deployed to care for people well and staff recruitment processes continued to be robust so only suitable staff worked with people. Staff managed people's medicines safely and staff understood how to safeguard people from abuse. The provider continued to manage risks to people and the premises well.

The provider continued to ensure staff received the necessary training, supervision and appraisal to care for people. Staff supported people to access the healthcare services they needed. People received choice in their food and drink. Staff worked in accordance with the Mental Capacity Act 2005 and gained consent from people before carrying out their care.

People were cared for by staff who were caring and who knew them well. People were treated with dignity and respect by staff and were encouraged to share their views on their care and had access to an advocacy service. Staff supported people to be as independent as they wanted to be.

People had access to activities they were interested in and received care centred on them as individuals. People's care plans and personal goals were regularly reviewed and people, their relatives and others important to their care were involved in the reviews. A suitable complaints process was in place to ensure complaints were used to improve the service and that complaints records were clear.

A registered manager was in place who had a good understanding of their roles and responsibilities, as did staff. Thorough quality audits were in place to assess, monitor and improve the service. The registered manager and provider encouraged communication with people, relatives and staff well through a variety of means such as meetings, questionnaires and newsletters.

The service met all the fundamental standards. Further information is in the detailed findings section of the report.

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

The Regard Partnership Limited - Tolworth Park 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 was a comprehensive inspection. The inspection took place on 3 January 2017 and was unannounced. The inspection was carried out by a single inspector.

Before our inspection we reviewed information we held about the service. This included statutory notifications received from the provider since the last inspection and the Provider Information Return (PIR). The PIR is a form we asked the provider to complete prior to our visit which gives us some key information about the service, including what the service does well, what the service could do better and improvements they plan to make.

During the inspection we spoke with two people who used the service, the registered manager and the locality manager, a senior manager who oversaw the service who the registered manager reported to and two care staff. We looked at a range of records including two staff files, two people's care plans and other records relating to the management of the home such as medicines records.

Is the service safe?

Our findings

We asked people if they felt safe in the home. One person said, "Yes" and another nodded and smiled. Our discussions with staff showed they understood how to keep people safe from abuse and neglect and they had received training in this.

The provider continued to recruit staff using robust checks of their suitability for the role. Such checks included an interview, obtaining references from previous employers, checking for any health conditions which may require reasonable adjustments to the role, criminal records, training, qualifications, the right to work in the UK, identification and proof of address.

Staff told us there were enough staff deployed to meet people's needs. The registered manager told us staffing numbers were flexible based on people's needs each day, with more staff deployed when people required support outside the home, such as for activities and appointments. Staff confirmed this and we viewed rotas which supported this.

People received their medicines safely. Our checks of medicines records showed no omissions in medicines administration and staff carefully recorded medicines which were received and returned to be disposed of. We carried out stock checks of medicines which confirmed people received their medicines as prescribed. Medicines were stored safely. Each year staff received annual medicines training and two medicines assessments to check they remained competent to administer medicines to people.

The registered manager ensured risks to people were assessed and suitable risk management plans put in place as part of keeping people safe. These addressed risks to each individual, such as those relating to mobility, continence, nutrition and fire safety. The provider supported people to take positive risks, such as carrying out household chores, as part of maintaining their independent living skills. Staff recorded accidents and incidents clearly and the registered manager analysed these reports systematically each month to look for patterns and to check people received the right support.

The registered manager managed risks relating to the premises and equipment well so they remained safe. External specialists were contracted to check and maintain systems including fire, water, gas and electrical safety. Staff also carried out regular health and safety checks including checks of the environment, first aid box and fire systems. The registered manager ensured repairs were carried out promptly by tracking maintenance requests on an electronic system used by the organisation to ensure the premises and equipment were appropriately maintained.

Is the service effective?

Our findings

People received care from staff who received the necessary training and support to carry out their roles. Staff told us the training they received was of good quality and helped them understand people's needs. Training records showed staff received regular training in a range of topics. They also received regular supervision with the registered manager. Staff told us supervision was an opportunity to receive guidance on relevant topics. Records showed the registered manager reviewed staff training needs during each supervision. Staff also received appraisal twice a year where they received feedback on their performance and set developmental goals for the coming year.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). People were supported by staff who understood the Mental Capacity Act (2005) and how to use this within their daily work with people. Staff all received training in MCA and DoLS. The registered manager applied for authorisations to deprive people of their liberty as part of keeping them safe and renewed applications when required.

People made positive comments about the food they received. One person told us, "It was very nice" when we asked them how their meal was. People received food of their choice and we saw different meals were prepared for individuals according to their preferences. Mealtimes were flexible and people could choose where they wanted to eat their meals.

People were supported to maintain their health. The registered manager worked with external learning disability services to ensure people had health action plans in place. These action plans detail how people can remain healthy, such as what health reviews they should have each year and when. People were supported to access a range of healthcare services including their GP, dentists, opticians and psychiatrists. Staff monitored people's weight and took action as required. We saw that staff were appropriately supporting a person whose weight was fluctuating, with their nutrition.

Is the service caring?

Our findings

People were positive about the staff who supported them. We asked one person if they liked it at the home and they nodded. We asked them if they liked the staff and they responded by saying the name of the staff member they liked. In a recent survey a relative commented, "My [family member] is being cared for by caring, professional staff."

People were cared for by staff who knew them well. Most staff had worked with people at the service for many years and had built up good relationships with them. Staff knew people's preferences, interests and the people who were important to them. Staff also understood the best ways to communicate with people. We observed staff knew how to phrase information and when people required repetition to help them understand. This information was recorded clearly in people's care plans for staff to refer to in caring for people. In addition we observed staff understood people's particular ways of communicating. We observed staff spent much time closely interacting with people, sitting with them and talking to them warmly or taking them out individually to local activities. Staff made people feel they mattered, including celebrating special events such as birthdays.

Staff treated people with dignity and respect and gave people the privacy they needed. We observed staff knocked and waited for permission before entering people's bedrooms. When one person said they preferred staff did not enter staff respected this. Staff supported people to dress in matching clothes appropriate for the weather. Staff also supported people to maintain their appearance with regular haircuts and nail varnish if people wished.

People were supported to be as independent as they wanted to be. One person told us, "I'm doing the washing up. I like it. I clean tables." We observed people being supported to make snacks and staff described how other people were supported to make hot drinks. People were involved in household chores such as laying and wiping the table and doing their laundry.

Each person had a keyworker who they regularly met with to share their views on their care, to set goals and plan their care. People attended the Kingston Learning Disabilities Parliament which included discussions of various topics relevant to them. They also attended local advocacy services where they could discuss any aspect of their life and raise concerns to an independent person.

Is the service responsive?

Our findings

Each person had an activity programme specific to their interests. During our inspection people were supported by staff to attend activities in the community. Regular activities included visiting local social groups and using sensory rooms for people with learning disabilities, swimming, cooking and visits to the pub.

People's care plans included information about their personal history, preferences, interests and goals for the future. The provider had a process in place where staff reviewed people's care plan goals after each shift, then also weekly and monthly. In this way people's care plans were reviewed and updated regularly and were centred on them as individuals. This meant people's care plans were reliable for staff to follow in providing care in the best ways for the individual. People were involved in their care plan review process. They were also involved in annual reviews by social services as well as six monthly reviews held internally. Their relatives and others important to their care were invited if appropriate, to contribute to the process.

A suitable complaints policy continued to be in place which was available in an easy-read format to help people using the service understand it more easily. Any complaints were dealt with promptly, according to the procedure. We saw records relating to a complaint that had been received, as well as action taken to resolve it and the outcome were clearly recorded.

Is the service well-led?

Our findings

There had been a change in registered manager since our last inspection as the current registered manager registered with the CQC in February 2016. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. Our discussions with the registered manager and our findings during this inspection showed they had a good understanding their roles and responsibilities well, as did staff at the service.

A wide range of checks of health, safety and quality were carried out at the service regularly by staff. The registered manager oversaw these checks and each month summarised their findings in an electronic monitoring tool. The locality manager also closely monitored the service. They checked the registered manager's monthly submissions and also visited the service regularly to gather feedback from people and staff and to audit various aspects of the service. They produced reports and the registered manager put action plans in place if any areas for improvement were identified. Professional auditors employed by the organisation also checked health and safety twice a year and all other aspects of service provision twice a year. Our inspection of this service showed these checks were effective in assessing and monitoring the quality of service and in making sure records were kept up to date.

The registered manager continued to encourage open communication with people and staff. Regular staff meetings and 'house' meetings took place. Minutes showed people were encouraged to share feedback on the service and plan forthcoming activities and staff told us the registered manager always listened to their ideas. The provider continued to gather feedback from people via questionnaires. We viewed the most recent questionnaire responses and saw that people's feedback was positive about all aspects of the service. A relative commented, "The home is being run professionally and my [family member's] needs properly assessed." The provider communicated good news stories and developments within the organisation to keep people, relatives and staff up to date through a quarterly newsletter.