Real Life Options

Real Life Options - 96 Bishopton Road

Inspection report

96 Bishopton Road
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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

About the service
Real Life Options – 96 Bishopton Road provides care, support and accommodation for up to six people with a learning disability. At the time of the inspection there were six people living at the service.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service received planned and co-ordinated person-centred support that is appropriate and inclusive for them.

People's experience of using this service and what we found
People told us they felt safe. There were systems and processes in place to help protect people from the risk of abuse.

There were enough staff on duty to meet people's needs. Staff understood the needs of the people they supported well. Safe recruitment procedures were followed.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People were able to choose what they wanted to eat and drink and mealtimes were flexible. Staff prepared meals that met any special dietary needs people had. People were supported to have access to a range of healthcare professionals to ensure they remained healthy.

Staff treated people with dignity and respect. There was a relaxed, homely atmosphere.

People's care was developed around their wishes, preferences and goals. Staff had explored what opportunities were available within the local community and supported people to attend social events.

A range of audits and checks were carried out to monitor the quality and safety of the service. Action was taken if any issues or concerns were identified.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

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

Rating at last inspection and update
The last rating for this service was good (published 9 May 2017).

Why we inspected
This was a planned inspection based on the previous rating.

Follow up
We will continue to monitor information we receive about the service until we return to visit as per our re-inspection 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.

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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 Care Act 2014.

Inspection team
The inspection was carried out by one inspector.

Service and service type
Real Life Options – 96 Bishopton Road is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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 first day of this inspection was unannounced.

What we did before the inspection
We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service.

We used the information the provider sent us in the provider information return. 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. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection
We spoke with two people about their experience of the care provided. Although not everyone was able to communicate with us verbally we spent time with all six people. We also spoke with six members of staff including the registered manager and support workers.

We reviewed a range of records. This included two people's care records and medication records. We looked at one staff file in relation to recruitment and viewed supervision and appraisal records. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

After the inspection
We received additional information from the registered manager about the actions they had taken following our initial feedback.

Good

Is the service safe?

Our findings

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

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

Systems and processes to safeguard people from the risk of abuse
- The provider had systems in place to help protect people from the risk of abuse.
- Staff had received safeguarding training and were knowledgeable about what action they would take if abuse were suspected.
- The registered manager understood their responsibilities with regards to safeguarding people. Referrals were made to the local authority safeguarding team where appropriate.

Assessing risk, safety monitoring and management
- Staff supported people in a way that kept them safe. Records confirmed that risks were being appropriately assessed, monitored and managed.
- The registered manager ensured all necessary checks and tests were carried out to make sure the building was safe.

Staffing and recruitment
- There were enough staff to meet people's needs.
- Safe recruitment procedures were followed to help ensure suitable staff were employed.

Using medicines safely
- Trained staff ensured people's medicines were ordered, stored and administered correctly.
- Medicines were reviewed in line with STOMP guidelines. STOMP is national project to stop the over-use of medicines in people with a learning disability, autism or both.

Preventing and controlling infection
- People were protected from the risk of infection. The environment was clean and staff followed safe infection control procedures.
- Staff had completed infection control and food hygiene training. The kitchen had been awarded five stars following a recent environmental health inspection.

Learning lessons when things go wrong
- Staff recorded accidents and incidents and the registered manager reviewed these to identify any themes or trends. They were also monitored by the provider, so action could be taken to reduce the risk of any reoccurrence.

Good

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience
- People were supported by staff who had completed training to meet the specific needs of people who used the service.
- There was a supervision and appraisal system in place and staff told us they felt well supported.

Supporting people to eat and drink enough to maintain a balanced diet
- People we spoke with told us the food was good. People were offered a variety of food and drinks and staff knew people's likes and dislikes.
- Staff were aware of people's special dietary needs and food was prepared in line with these.
- Mealtimes were flexible; people were given the option to eat when they were hungry rather than at fixed times. Some people were able to prepare snacks and drinks with the support of staff.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support
- People were supported to have access to a range of healthcare professionals to help ensure they remained healthy.

Adapting service, design, decoration to meet people's needs
- The premises were designed to provide a homely environment and had recently been redecorated. Murals had been chosen by the people who lived at the service and both kitchen areas had also been fully updated.
- People's rooms were personalised and decorated with personal effects and were furnished and adapted to meet their individual needs and preferences.
- A sensory area had been created in one of the lounges. This included a variety of light and sound equipment that we saw people enjoying during the inspection.

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.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Consent to care was sought in line with legal requirements.
- The registered manager had submitted DoLS applications to the local authority for review/authorisation in line with legal requirements. DoLS authorisation had been granted for people deprived of their liberty and at the time of our inspection there were no conditions attached to any of the authorisations.
- Staff had considered the least restrictive ways of working. This positively impacted on people's wellbeing.

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

- Management and staff assessed people's needs and support plans were written and regularly reviewed to document how best to support people and ensure they remained up to date.

Good

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Staff treated people with kindness and respect. The atmosphere in the service was calm and relaxed and we observed caring interactions between staff and people using the service.
- People were supported by a very dedicated staff team. There had recently been a change to one person's mental health and for a period of time their needs had increased dramatically. The registered manager told us the staff were determined that the person should be supported to stay at Bishopton Road and worked with external professionals to help make this possible.

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

- Staff supported people to be involved in and agree decisions about their care. For example, two people preferred not to have their annual flu jab and their choice in this was respected.
- People had access to advocacy services if this was needed. An advocate helps people to access information and be involved in decisions about their lives.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and dignity.
- Staff supported people in a way that maximised their independence, choice and control. For example, some people were supported to make drinks and snacks and went with staff to do the food shopping each week. One person told us, "I help with the cooking sometimes."

Good

Is the service responsive?

Our findings

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

At the last inspection this key question was rated good. At this inspection this key question has remained the same. 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

● People's care was developed around their wishes, preferences and goals. Detailed support plans were in place which instructed staff how to deliver care which was responsive and met people's needs.

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 carers.

● The registered manager and staff team had a good knowledge of people's communication skills. Easy read documentation was available. These documents used pictures to help people understand the written words.

● People had very detailed plans in place to let staff know the best way to communicate with them.

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 took part in a variety of activities within the home. Staff also supported people to go out in the local community, have holidays and attend sporting events. One person told us, "I like it when they take me out. I listen to radio one when I'm out in the car."

● Staff recognised when people's interests changed and responded appropriately. One person had been attending a woodwork course, but staff had identified that they no longer got the same enjoyment from the sessions. They knew the person enjoyed practical activities and had encouraged an interest in gardening as an alternative.

● Staff supported people to maintain family relationships. Visitors were welcomed at any time and people also went out to visit family.

Improving care quality in response to complaints or concerns

● There was a complaints procedure in place. People were supported to raise any concerns and action was taken in response to these.

End of life care and support

● End of life preferences were recorded in a booklet that staff completed in conjunction with people and their families. People all had funeral plans in place.

● Staff had received end of life care training. Although nobody was receiving end of life care at the time of

our inspection we saw evidence of how this had been successfully managed in the past.

● Staff told us how much this forward planning had helped when a person had passed away. One member of staff said, "Staff felt confident they were following the person and their family's wishes. Because we had asked all these questions in advance we didn't have to put additional pressure on [family member] when the end came. They were so grateful."

Good

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- There was a relaxed and friendly atmosphere in the service. Staff told us they felt valued and enjoyed their work.
- People told us they liked the registered manager. We saw people appeared comfortable around him and were happy to speak with him in a relaxed and informal way.

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

- The registered manager understood their duty of candour responsibilities. They had submitted notifications of specific events in line with legal requirements.
- A range of audits and checks were carried out to monitor the quality and safety of the service. Action was taken if any shortfalls were identified.

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

- People and staff were actively involved in all aspects of the service.
- The provider sought feedback from people using the service via meetings and surveys. This feedback was acted upon to make improvements in the service.
- Staff meetings were held regularly. Staff told us they felt supported by the registered manager. One staff member said, "[Registered manager] is always available his door is always open. [Registered manager] is a great manager. He will come in every day when he can and if he needs to be elsewhere for any reason he will always call in to check everything is ok."

Working in partnership with others

- Staff liaised with health and social care professionals to make sure people received joined up care which met their needs.