

The Reach Standards mapped to the Care Quality Commission's Key Lines of Enquiry (KLOEs)



Support for Living

a Paradigm product

The Reach Standard	Sample CQC Key Lines of Enquiry (KLOE) prompts	Linking the KLOEs and Reach
1. I choose who I live with 	E2.1 Do people have their assessed needs, preferences and choices met by staff with the right qualifications, skills knowledge and experience. S1.3 How are people protected from discrimination which might amount to abuse or cause psychological harm? This includes harassment and discrimination in relation to protected characteristics under the Equality Act.	EFFECTIVE: Your staff have the right skills to help people choose housemates who are a good match to their needs and preferences, and who will respect their choices SAFE: You make sure that tenancy agreements contain adequate provision for protecting quiet enjoyment and freedom from nuisance and harassment of all tenants. Any breaches of tenancy agreement by housemates which cause distress or harm - including racial, sexual and homophobic harassment - are dealt with decisively. Whilst your primary aim is to change behaviour, stop abuse and help people sustain their tenancies, you would pursue people's rights to protection to the point of eviction if necessary.
2. I choose where I live 	S2.2 How do risk management policies and procedures minimise restrictions on people's freedom, choice and control, in particular for people who lack mental capacity. E6.4 How does the signage, the decoration and other adaptations to the premises help to meet people's needs and promote their independence? How are any changes to the environment managed to avoid causing distress to people who live there? E4.1 How do staff work together to ensure that people receive consistent, timely, co-ordinated, person-centred care and support	SAFE: Helped by your positive risk management and positive behaviour support policies, you accept referrals and support people who have moved from more restricted or secure environments e.g. residential care, ATUs EFFECTIVE: You enable people to choose where they live by making personalised adaptations to ordinary accommodation to meet different needs, including physical and sensory disabilities, profound and multiple learning disabilities, and complex autism EFFECTIVE: Whether the person is moving into a new home of their

	when they are referred to, use, leave, or move between, different services R3.1 Are people's preferences and choices for their end of life care and where they wish to die, including in relation to their protected equality characteristics, spiritual and cultural needs, clearly recorded communicated, kept under review and acted on.	choice (or in their best interests) or moving out to live somewhere else of their choice (or in their best interests), your staff co-ordinate and work in a person-centred way with staff from other services/providers RESPONSIVE: You make timely adaptations to physical environment and support so that people can choose to continue living at home at the end of life. You make timely arrangements for referrals to residential nursing, hospice or other care in accordance with the person's wishes or in their best interests
3. I have my own home (with a tenancy or ownership) 	E6.1 How are people involved in decisions about the environment? E6.3 What arrangements are there to ensure people have access to appropriate space: - In gardens and other outdoor spaces - To see and look after their visitors - For meaningful activities - To spend time together - To be alone	EFFECTIVE: Staff support people to make choices about how to decorate and personalise their space, and how to negotiate with co-tenants about the care, maintenance and use of shared areas EFFECTIVE: The organisation registers with accommodation that has sufficient private, communal and outside space; and designs rotas to be flexible to different people's needs being met simultaneously
4. I choose who supports me and how I am supported 	C1.2 How does the service makes sure that people, and those close to them, feel they matter, and that staff listen to them and talk to them appropriately and in a way they can understand. C1.4 Do staff know and respect the people they are caring for and supporting, including their preferences, personal histories, backgrounds and potential. C1.5 Do staff show concern for people's wellbeing in a caring and meaningful way, and do they respond to their needs quickly enough. C1.6 Do staff understand and promote compassionate, respectful	CARING: You involve people you support in recruiting staff. Your staff are good at understanding when people can make their own decisions and when other people – family, friends, professionals – might need to be involved in decisions about support or treatment. CARING: Both as individuals and in teams your staff work in a way that the person wants them to work. Your staff: • Listen and talk in a way that people can understand • Care about people's wellbeing and respond quickly to their needs

	and empathetic behaviour within the staff team. C2.1 Do staff recognise when people need and want support from their carers, advocates or representatives to help them understand and be involved in their care, treatment and support. C3.4 How does the service take people's preferences and needs and their protected and other characteristics under the Equality Act into account when scheduling staff. R1.1 How do people, or those with authority to act on their behalf, contribute to planning their care and support and how are their strengths, levels of independence and quality of life taken into account? R3.3 How are people reassured that their pain and other symptoms will be assessed and managed effectively as they approach the end of their life, including having access to support from specialist palliative care professionals, particularly if they are unable to speak or communicate. W2.6 Are there clear and transparent processes for staff to account for their decisions, actions, behaviours and performance. W4.1 Are resources and support available to develop staff and teams, and drive improvement.	• Take into account personal history and background, preferences and potential • Are compassionate, respectful and empathetic • Account for people's protected characteristics in the way they organise or give support RESPONSIVE: The people you support (or the right people in their best interests) contribute to planning their care and support. Staff take into account: • People's strengths and abilities • Levels of independence • Quality of life • Pain management and end of life care plans WELL-LED: You have processes in place to make sure staff record and can be monitored about planning decisions, including: • How the person was involved • Whether/how best interests decisions were made • What happens to outcomes that are important to people WELL-LED: You plan and resource continuous improvement in person-centred approaches, as well as teaching staff how to live up to CQC and REACH standards
5. I choose my friends and relationships 	C3.6 Are people's relatives and friends made to feel welcome and able to visit without being unnecessarily restricted. R1.4 Where the service is responsible, how are people encouraged and supported to develop and maintain relationships with people that matter to them, both within the service and the wider community, and to avoid social isolation. R3.2 How are people, and their family, friends and other carers,	CARING: Your staff do not engage in parent-blame and recognise that for many of the people you support family is a source of constant support, advocacy and expertise in relation to their loved one. RESPONSIVE: You support people to keep in contact with family, friends and other people who are important to them. You also support people to develop new relationships, including friendships and romantic or sexual relationships if that is what the person wants

	involved in planning, managing and making decisions about their end of life care. R3.5 How does the service support people's families, other people using the service and staff when someone dies. W3.4 How does the service enables and encourage accessible open communication with all people who use the service, their family, friends, other carers, staff and other stakeholders, taking into account of their protected and other characteristics.	RESPONSIVE: If the person you support dies in service, you support all those people close to them who are affected by their death including partners, family and friends, as well as co-tenants and staff WELL-LED You encourage your staff to communicate openly with family and friends in a way which respects their role and their identity and which works for them
6. I get help to make changes in my life 	C3.5 Can people can be as independent as they want to be. S2.2 How do risk management policies and procedures minimise restrictions on people's freedom, choice and control, in particular for people who lack mental capacity. R2.1 How well do people who use the service know how to make a complaint or raise concerns and how comfortable do they feel doing so in their own way. People encouraged to do so, and how confident are they to speak up. R2.2 How easy and accessible for people to use the complaints process or raise a concern. What extent are people treated compassionately and given the help and support they need to make a complaint. E7.7 Do staff recognise when people aged 16 and over, who lack mental capacity, are being deprived of their liberty, and do they seek authorisation to do so when they consider It necessary and proportionate.	CARING: In your organisation, your staff care for people when necessary but recognise that caring about people means active support and involving and engaging people in all aspects of their lives. In this way people have more control and choice, can learn new skills, and make changes that they want to make. SAFE: Your risk management policy and practice is all about increasing people's freedom, independence and enabling people to take risks which bring new experiences and achieve positive changes. RESPONSIVE: You make it possible for people to speak out about changes they would like to see in who supports them and how they are supported. If people are unhappy or want to complain they know how to do this and can communicate their complaint in any way that works for them. EFFECTIVE: Your staff understand and apply MCA/DOLF and always look for the least restrictive solutions to manage risks. Restraint, if used at all, is only ever used with the correct legal safeguards.

7. I choose how to be healthy and safe



S1.4 How are people supported to understand what keeping safe means, and how are they encouraged and empowered to raise any concerns they may have about this?

S1.3 How are people protected from discrimination, which might amount to abuse or cause psychological harm. This includes harassment and discrimination in relation to protected characteristics under the Equality Act.

S4.7 How does the service engage with healthcare professionals in relation to reviews of medicines at appropriate intervals.

S5.1 What are the arrangements for making sure that premises are kept clean and hygienic so that people are protected from infections that could affect both staff and people using service.

S5.5 Have all relevant staff completed food hygiene training and there are correct procedures in place and followed wherever food is prepared and stored.

S6.1 Do staff understand their responsibilities to raise concerns, to record safety incidents, concerns and near misses and to report them internally and externally where appropriate.

W3.3 How are staff supported to question practice and how are people who raise concerns, including whistleblowers, supported and protected.

E3.2 How are people supported to have a balanced diet that promotes healthy eating and the correct nutrition.

E5.1 How are people's day-to-day health and wellbeing needs met.

E5.3 How are people involved in regularly monitoring their health.

SAFE: You support people to understand what keeping safe means for them in a highly personalised way, taking into account the benefits of taking positive risk and respecting people's mental capacity. People know how to make a complaint and you, and your managers are present and approachable at any time about anything.

SAFE: You take all forms of discrimination, bullying and harassment very seriously and always take action to protect victims. You support people to have equal access to goods and services beyond the organisation and to deal with hate crime in the community, including reporting to the police and going to court

SAFE: Your staff know how to support and/or teach people to prepare, cook and store food safely, including when and how to dispose of expired foods. Staff support people to keep their homes clean and hygienic so that everyone who lives, works or visits are protected from infection and illness

SAFE: Your staff take responsibility for reporting incidents which have affected or might have affected, the health, well-being or safety of the people you support. Staff understand how to report safeguarding incidents to the CQC, LAs, Police and Charity Commission as necessary – as well as accidents to RIDDOR/HSE

EFFECTIVE: Your staff encourage people to maximise their physical and mental health and well-being by:

- Promoting a balanced, nutritious diet
- Encouraging exercise and activities which promote well-being

	E5.4 Can people access care, support and treatment in a timely way and, where the service is responsible, are referrals made quickly to appropriate health services when people's needs change. C3.2 Do staff respond in a compassionate, timely and appropriate way when people experience physical pain, discomfort or emotional distress.	• Helping people monitor their own health • Making sure people have annual health checks and medication reviews • Supporting people to access primary and secondary health services for treatment and early intervention • Recognising signs of distress, pain and discomfort (including pain and distress as a cause of behaviour that challenges the service) and responding quickly and appropriately.
8. I choose how I am part of the community 	R1.3 Where the service is responsible, how are people supported to follow their interests and take part in activities that are socially and culturally relevant and appropriate to them, including in the wider community and where appropriate, have access to education and work opportunities. W3.2 Are there strong links with the local community. How does the service strengthen relationships beyond their key organisations?	RESPONSIVE: Your staff make it possible for people to take part in a range of personalised social inclusion activities, including: • Leisure and entertainment • Sports and fitness • Hobbies and interests • Faiths and beliefs • Learning and vocational activities • Courses and qualifications • Paid jobs and volunteering • Community groups and campaigning • Speaking out and self-advocacy • Voting in local and general elections WELL-LED: Your staff support people to use community resources and participate in the same way as other citizens. You also develop partnerships with mainstream and community organisations that can provide the people you support with a wider range of opportunities, experiences and social networks.
9. I have the same rights and responsibilities as other citizens 	S1.3 How are people protected from discrimination which might amount to abuse or cause psychological harm? This includes harassment and discrimination in relation to protected characteristics under the Equality Act	SAFE: Your policies and practices protect people from abuse and breaches of human and civil rights both within and outside your services. Your staff know how to uphold the rights contained within the Single Equality Act, the Human Rights Act, Mental Capacity Act 2005, Deprivation of Liberty/Liberty

	E1.2 What processes are in place to ensure there is no discrimination, including in relation to protected characteristics under the Equality Act, when making care and support decisions. C2.2 Do staff make sure they give information to people, their families and other carers about external bodies, community organisations and advocacy services that can provide independent support and advice, answer questions about their care, treatment and support and where necessary advocate for them. How does the service support people to contact and use these services? C3.1 How does the service and staff make sure that people's privacy and dignity needs are understood and always respected, including during physical or intimate care. W1.6 Does the service have and keep under a review a clear vision and a set of values that includes a person-centred culture, involvement, compassion, dignity, independence, respect, equality, wellbeing and safety. W3.5 How are people's views and experiences gathered and acted on to shape and improve the services and culture.	Protection Safeguards, the Mental Health Act, Housing Act 2004, and General Data Protection Regulations. CARING: You encourage the people you support and their families to seek independent support and advocacy about the services they are receiving from you and others, about Care Act assessments and other statutory decisions in which your organisation might have a conflict of interest WELL-LED: Your organisation is values-led, and values are not just stated but lived by directors/trustees, managers, staff and volunteers. The values are tangible in the way that staff are recruited, trained, inducted, rewarded and recognised; in what support is provided and how it is provided; in the way you deal with concerns, incidents and complaints; in the way you manage and monitor all aspects of quality and safety, including safeguarding. Those values include: • Person-centred • Inclusion/involvement • Honesty/openness • Respect for privacy and dignity • Compassion and empathy • Equality and diversity • Continuous improvement
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