

Community Integrated Care

Dean View Villas

Inspection report

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Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service well-led?	Good ●
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Summary of findings

Overall summary

About the service

Dean View Villas is a residential care home providing personal care to up to 8 people. The service provides support to people living with a learning disability and/or autism. At the time of our inspection there were 6 people using the service.

People's experience of using this service and what we found

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support:

Staff supported people to access the community. 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.

Right Care:

People were supported to make daily living choices. There were positive relationships between people and staff, which meant people were treated with dignity and respect.

Right Culture:

Relatives told us there had been issues with staff turnover and different managers. Both relatives and staff confirmed the registered manager was making improvements.

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 requires improvement (published 7 September 2021).

At our last inspection we recommended the provider reviews people's medicines. At this inspection we found the provider had improved.

Why we inspected

This inspection was prompted by a review of the information we held about this service. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Dean View Villas on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Dean View Villas

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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

One inspector carried out this inspection.

Service and service type

Dean View Villas is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Dean View Villas is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was announced. We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to

Speak with us.

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. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke to 2 people who lived at the service and contacted 3 relatives by telephone. We spoke with 3 staff, the registered manager, a senior support worker and a support worker. We also received email feedback from 2 staff. We reviewed a range of documents relating to the safety and management of the home.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection we recommended the provider reviews all prescribed medications in the service to ensure where necessary, appropriate medication reviews were completed on a regular/as required basis. The provider had made improvements.

- Medicines were managed safely. Medicines administration records confirmed which medicines people had received. The registered manager carried out regular checks to ensure people had the required medicines.
- Support workers were trained in how to safely administer medicines and had their competency assessed to ensure they did this safely.

Systems and processes to safeguard people from the risk of abuse

- People confirmed they felt safe living at Dean View Villas. One person said, "I quite like it. They are nice people here, staff and residents."
- Relatives confirmed people received safe care. A relative said, "Oh yes, [family member] is safe at the moment."
- The provider had systems to help protect people from abuse. Safeguarding issues were investigated and recommendations implemented.
- Staff knew about the whistle blowing procedures and were confident to raise concerns, if required. One staff member said, "The staff are good, they put people first. It is really safe, staff are quick on reporting things. I have no concerns about safety."

Assessing risk, safety monitoring and management

- Improvements had been made so that identified risks were managed safely. The provider assessed potential risks and identified measures to help keep people safe.
- Health and safety checks were up to date to help keep the premises safe and procedures developed to deal with emergency situations.

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

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Staffing and recruitment

- There were usually enough staff to meet people's needs. People commented, "I have got to have people [care staff] with me to go outside. I cannot go out on my own. I went with [staff member] a few times. I like to go shopping" and "I go shopping every day." Although staff felt staffing levels were safe, some staff felt an extra member of staff would allow people more opportunities to access the community.
- New staff were recruited safely.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- The provider was following relevant guidance in relation to visiting the home. There were currently no restrictions in place.

Learning lessons when things go wrong

- The provider had systems to enable managers to ensure lessons were learnt. Senior management reviewed incidents and accidents to check appropriate action had been taken to address the issue.
- Individual incidents and accidents had been logged and investigated.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. 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

- The home had a person-centred culture and people received personalised care.
- Staff gave positive feedback about the culture in the home and were focused on people's needs. One staff member told us, "I love my job in Dean View, it is a lovely place to work. I love all the residents we support they have such lovely personalities and make you smile. I love that most staff in Dean View feel this way and genuinely love and care about the people we support."

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 and staff knew about the duty of candour. The registered manager was clear about their role in ensuring people received good care.
- People, relatives and staff described the registered manager as supportive and approachable. One staff member told us, "I feel very supported. [Registered manager] is very easy to approach and is helping me develop further in my career."
- Relatives told us turnover of managers and staff had negatively impacted the service, but this had improved recently. One relative commented, "It is getting better since [registered manager] had been in post."

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

- There were opportunities for people, relatives and staff to provide feedback about the service. People and relatives had been involved in 6 monthly reviews to discuss the care provided. The registered manager was planning a coffee morning.
- Staff meetings had taken place regularly since the registered manager had been in post. One staff member said, "We have a team meeting every month, we can share our views. [Registered manager] says if anyone doesn't feel confident [speaking in the meeting] to speak to him afterwards."
- The provider consulted with staff each year, the survey for 2023 was being organised.

Continuous learning and improving care; Working in partnership with others

- The provider had a structured approach to quality assurance. The registered manager completed audits to check on the quality and safety of the service. The provider's quality team also completed checks on the

service which were effective in identifying areas for improvement.

- The registered manager maintained an action plan for the service which was updated as and when new issues were identified. This included actions identified through external sources, such as local authority reviews of the service. Progress had been made against the outcomes identified in the action plan.