

Mig House Residential Care Home Limited

# MIG House Residential Care Homes

## 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

### About the service

MIG House Residential Care Homes is registered with the Care Quality Commission to provide accommodation and support with personal care to a maximum of 4 adults with learning disabilities. At the time of our inspection 4 people were living in the home.

### People's experience of the 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 assessment and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### Right Support

Staff focused and supported people with their strengths and promoted their independence so people could live a meaningful everyday life. People were supported by staff to pursue their interests and achieve personal goals.

The provider gave people care and support in a safe, clean, well-maintained environment that met their sensory and physical needs. People were supported to personalise their rooms. Staff supported people to access health and social care provisions in the community. People were able to take part in activities and pursue their interests in their home and local community.

Staff supported people to make decisions for themselves and followed the mental capacity and best interest process when required. Staff communicated with people in ways that met their individual needs. People were supported safely with their medicines in a way that promoted their independence. Staff supported people to participate in maintaining their own health and wellbeing.

### Right Care

Staff promoted equality and diversity in their support for people. They understood people's cultural needs and provided culturally appropriate care. We saw people received kind and compassionate care and support and respected people's privacy and dignity. 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 protected from the risks of abuse and neglect, as staff were trained to identify signs and were clear of their roles and responsibilities to protect people from harm. The provider responded to incidents and accidents appropriately and ensured that lessons were learnt, and appropriate referrals were completed, if required. Staff assessed people's risks appropriately and supported people to achieve their goals without barriers preventing their outcomes.

Staff were recruited safely and had the right skills to meet people's needs and keep them safe.

#### Right Culture

The registered manager and staff were motivated and focused on delivering a good service to the people they supported. People were encouraged to make daily choices on things that was important to them. The provider created a positive environment that helped people to achieve their personal goals. Staff knew and understood people well and were responsive to their needs.

Staff turnover was low, which supported people to receive consistent care from staff who knew them well. The service supported people to access independent advocates services when required. Staff supported people to see their families and friends.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

The last rating for this service was Good (published 12 September 2017).

#### Why we inspected

This inspection was prompted by a review of the information we held about this service.

Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

#### 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 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.

# MIG House Residential Care Homes

## **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.

#### Service and service type

MIG House 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. MIG House 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

The inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return (PIR). This is information providers are

required to send us annually with key information about their service, what they do well, and improvements they plan to make. We also reviewed notifications that the registered provider had sent to us. A notification is information about important events which the service is required to send us by law. We used all this information to plan our inspection.

#### During the inspection

We spoke with the registered manager. We reviewed a range of records. This included 4 people's care records, 6 staff files, training records, risk assessments and satisfaction surveys. We also looked at audits and a variety of records relating to the management of the service, including policies and procedures.

We spoke with 3 people during our inspection and 3 relatives by telephone to obtain their views of the service. We also spoke with 4 members of staff to ask them questions about their roles and to confirm information we had received about them.

# 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 Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- People told us they were happy and safe living at the home. One person said, "I like the staff, they are nice to me."
- There were effective systems in place to support people to report any concerns they may have about their welfare and to protect them from abuse.
- Staff received training and were able to tell us what actions they would take to safeguard people from risks.
- The management team were clear of their responsibilities in raising safeguarding concerns to the local authority and CQC to protect people they support.
- There was an up to date safeguarding policy in place for staff to follow.

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- The provider assessed people's risks and wellbeing prior to the person moving to the home. This practice helped to ensure staff were clear on how to keep them safe from avoidable harm.
- We saw that each person had an individual risk assessment associated with the person's individual support needs. The risk assessment covered, environment concerns people's health needs, and medicines. This gave staff guidance in how to manage people's care safely.
- Staff knew people well and were aware of people's risks and how to keep them safe.
- The provider ensured that there was up to date gas, electrical and fire system servicing and checks completed.

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff. This process helped to ensure staff were recruited safely, and staff had the right skills and experience to meet people's needs. The checks comprised of a pre-employment check, employment references, proof of identification and right to work in the UK.
- Staff absences were covered and managed by the provider's internal bank staff. This meant people received consistent care and support from staff they knew well.
- During the inspection, we spoke with people who told us that they felt supported by staff. Comments included, "The manager takes me to watch football." Staff help me when I need support." We saw positive interaction from staff and people.

### Using medicines safely

- People were supported to receive their medicines safely.
- People told us staff supported them with their medicines. One person said, "Staff help me to take my [medicines] when I need them,"
- The provider had a medicines policy and staff were trained and assessed before they administered medicines to people.
- Medicines audits were completed weekly and monthly. This helped identify any concerns and improvements if required.
- We reviewed people's medicine administration records (MAR) which were completed correctly by the staff.

### Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- We were assured that the provider admitted people safely to the service.
- We were assured that the provider used PPE effectively and safely.

### Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.

### Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- The provider had effective systems and processes to review incidents and accidents that occurred at the service. The registered manager analysed all incidents forms, which helped identify areas of learning and improvement. Actions were taken to minimise the risk of reoccurrence where relevant.
- Staff told us they received regular updates and meetings by the registered manager on any changes as part of lessons being learnt. Comments included, "The manager meets with us in staff meeting to discuss any changes to [people's] support due to concerns being identified" and "We receive update on a regular basis from our manager, this can be by emails, or during handover."



# 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 our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs were assessed, and care and support was delivered in line with current standards to achieve effective outcomes.
- People's relatives told us they were involved in the initial assessment process from the provider.
- Care plans contained essential information for staff to follow in meeting people's needs effectively.

Staff support: induction, training, skills and experience

- The service made sure staff had the skills, knowledge and experience to deliver effective care and support.
- The service had an induction programme for all new staff to complete, prior to them working with people unsupervised.
- Staff were trained and understood best practice in supporting people with a learning disability and/or autism.
- Staff were knowledgeable and committed to deploying techniques that promoted the reduction in restrictive practice.
- Staff felt supported and had opportunities to meet with their manager as a team and in regular supervision meetings.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to eat and drink enough to maintain a balanced diet.
- People were supported to make choices around meal planning and were helped to buy their weekly food shopping. One person said, "Staff help me to cook my food that I like to eat."
- People were supported to eat and drink in line with their cultural preferences and beliefs.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The provider ensured the service worked effectively within and across organisations to deliver effective care, support and treatment.
- People's families told us the staff contacted them if there were any concerns or changes in their relatives health and conditions.
- Care documents held important information on who was involved in the persons support and when staff were to contact them for advice, for example, social workers, and community health professionals.
- Staff recorded people's health and welfare progress. One staff said, "if we are concerned about a

[person's] health, we would seek advice from their medical professional and report to the manager."

Adapting service, design, decoration to meet people's needs

- People's individual needs were met by the adaption, design and decoration of the premises.
- People were supported to live in a safe, clean, well-furnished and a maintained environment, which met people's sensory and physical needs.
- People personalised their rooms and were given support to make decisions about the interior decoration and design of their home.
- There was an assessable communal kitchen, dining area and lounge that people could access with support or independently.

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 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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

- The provider was working exceptionally well in line with the Mental Capacity Act.
- We saw people had consent forms in place and staff acted in accordance with their wishes.
- Staff knew how to support people to access Independent Advocate services if required, to help people with making decisions about their life.
- Staff were clear about people's capacity to make decisions through verbal or non-verbal communication, and this was documented in their care plans.
- We saw people had MCA and best interest forms in place with the persons circle of support involved.

# 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 our last inspection we rated this key question Good. At this inspection the rating has select option Good. This meant people were supported and treated with dignity and respect. They were involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were well supported, and care plan were detailed on the persons like and dislikes.
- People received kind and compassionate care from staff who were positive, respectful and understood people well. One person told us, "Everyone is nice here."
- Staff received training on how to meet people's individual's sensory support needs and ensured they were supported from environmental factors that could be stressful to them.
- We observed staff members being respectful when interacting with people.

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

- People were supported to express their views and make decisions about their care.
- Staff understand people's individual communication styles and had developed a positive relationship with them. People were enabled to make choices for themselves, and staff ensured they had the information they needed. For example, a person used objects of reference or took staff to the item or activity they wanted to do. Another person made different sounds and tones, which staff understood the meaning of their communication.
- Care plans held information on people's choices and their wishes, this included relevant protected characteristics connected to their cultural or religious preferences.
- Each person had a key worker, who met with them to discuss their needs and plan activities and goals that they wanted to achieve.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence were respected and promoted.
- People and relatives told us they had the opportunity to try new experiences and develop new skills to help improve their independence. One relative said, "The staff has helped my [relative] to learn new skills that he can do for himself."
- People's care records outlined information on how people liked their privacy and tasks that people can do for themselves and areas where support was needed.
- People told us that staff knocked on people's bedroom doors before entering their room.

# Is the service responsive?

## Our findings

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

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people's needs were met.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People were supported as individuals, in line with their needs and preferences.
- Care plans were person centred and had information of people's support needs.
- Staff worked with people on ensuring their goals were meaningful and looked at different ways that goals could be achieved.
- Care plans held information on people's achievements and goals they had chosen to work towards.
- There was a focus on celebrating events that were important to the person. For an example, the day before our inspection, a person was supported to celebrate their birthday and family were invited to a small party. Staff also supported people to put up Halloween decorations around the home.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The provider was meeting the Accessible Information Standard. People's communication needs were understood and supported.
- Staff ensured people had access to information in formats they could understand.
- People used visual objects to help with their communication including photographs, use of gestures and symbols.
- Each person had an individual communication plan and passport that detailed the person's preferred methods of communication and the approach to use for different situations.

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 were supported to maintain relationships, follow their interests and take part in activities that were relevant to them.
- People were supported to undertake social and leisure activities in the community and visiting places of interest.
- People were supported to see their friends and families. This included attending social clubs and being supported to visit their family home on a weekly basis.
- Religious and cultural festivals for all faiths were celebrated at the home.

#### Improving care quality in response to complaints or concerns

- People's concerns and complaints were listened to, responded to and used to improve the quality of care.
- People and relatives told us they felt supported and listened to by staff. One person told us, "I can talk to staff about any concerns." A relative said, "The home will always call me if there is anything I need to be updated about."
- The home held meetings with people on a regular basis to receive feedback, which helped the provider to improve their service and to adjust people's care and support if required.

#### End of life care and support

- At the time of this inspection, no one was receiving end of life care.
- The provider had an end of life care policy in place to give staff guidance on the process that should be taken.
- We saw that people, were supported to have information that described how the person would like to be supported with their end of life wishes.

# 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 Good. At this inspection the rating has remained 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

- There was a positive and open culture at the service.
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- Relatives told us they felt people received good quality care and that the registered manager was approachable. Comments included, "I can speak with the manager or staff any time I needed to, they update me on any changes. Another relative said, "the care is very good, I know that my [relative] is looked after."
- Staff told us they felt respected, supported and valued by the management team.

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; Continuous learning and improving care

- The provider understood their responsibilities under the duty of candour.
- The service had systems in place to identify and monitor the quality of the home. This included feedback from people who used the service and their relatives, staff and stakeholders.
- The management team completed audits and spot checks of care plans, medicines and infection control, which helped improve and develop the running of the service.
- The provider had created a learning culture at the service, which improved the care people received.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- Relatives confirmed staff encouraged people to be involved in the development of the service. For example, a relative said, "My [relative] has lived at the home for a long time and have a positive relationship with everyone who works there."
- The registered manager had the skills and experience to be able to give the staff team support and advice effectively. They had a good knowledge of people's support needs and a clear oversight of the services they managed.
- The registered manager completed care plans, medicines and infection control audits and spot checks were carried out to improve and help develop the running of the service. The provider had created a learning culture at the service which improved the care people received.

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

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.
- We saw that the provider asked for feedback from people and their relatives. This was received verbally and by questionnaires.
- The registered manager held monthly staff meetings, this gave staff the opportunity to share ideas and challenges that they may be experiencing.

Working in partnership with others

- The provider worked in partnership with others.
- The registered manager attended different meetings and events to keep themselves updated with the latest practices in health and social care. This included partnership working with the local authority and other providers within the area.
- People were supported by the staff to make health appointments and attended reviews.