

# MacIntyre Care

# Southview Close

### **Inspection report**

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Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good

# Summary of findings

### Overall summary

#### About the service

Southview Close is registered to provide accommodation and personal care to people with a learning disability, some of whom may have complex needs. The home can accommodate a maximum of 12 people at any time. 11 people were using the service at the time of this inspection.

#### 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

We observed positive and familiar interactions between people using the service and staff. Staff knew people well and were able to anticipate their needs. The families of people told us their relatives were supported by kind and caring staff who knew them well. Support was planned and delivered in a personalised way, promoting people's choice and independence. People's prescribed medicines were managed safely. 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's human rights were upheld. Staff treated people with dignity and respect. Personalised accessible support plans provided detailed information to guide staff. Suitable staffing levels were maintained, offering continuity and reliability in support. Appropriate recruitment checks were completed. New staff completed a comprehensive induction and training programme on commencement of their employment. Staff understood their role and responsibilities and felt supported by the registered manager.

#### Right Culture:

People, their relatives and staff were positive about the management and culture of the service. Quality monitoring systems were in place, providing oversight of the service. Areas of development were identified and planned for.

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

#### Rating at last inspection

The last rating for the service was good (published on 16 October 2018).

#### Why we inspected

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

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

#### 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 •
Is the service well-led? The service was well-led.	Good



# Southview Close

**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

The inspection was carried out by 1 inspector.

#### Service and service type

Southview Close is a 'care home' without nursing. 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. 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 unannounced.

We visited the service on 16 March 2023.

#### What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority commissioning team, community learning disability team and the health protection team. 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 used all this information to plan our inspection.

#### During the inspection

We spoke with 3 people using the service and received feedback from the relatives of 3 people. We also spoke with 4 members of staff including the registered manager and support workers. During the inspection visit we looked at 2 people's care records, 3 staff files and other records relating to the management of the service.

Additional evidence including a medicines audit was sent to us following our visit.



### 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. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Staff were aware of their responsibilities in reporting and responding to any concerns, so people were kept safe. A staff member said, "The manager is very open. It will be dealt with straight away."
- People's relatives told us, "It seems to me that the staff are very caring and they like [person] as much as she likes them" and, "All the staff at Southview Close that we have met seem very interested in [person's] welfare and are dedicated in their roles."
- A care professional involved with the service commented, "Above all Southview is a place where the residents are looked after with kindness and compassion and their care is outstanding."
- Discussion within supervisions and team meetings explored any safeguarding issues and where any changes were needed to help ensure peoples safety.
- Reports documented any incidents of distressed behaviour, possible triggers, and the staff response. Quality assurance reports were completed monthly summarising any incidents with action plans in place to help keep people safe.

Assessing risk, safety monitoring and management

- Comprehensive risk management plans helped guide staff in the safe care and support of people with complex needs and behaviours. This was supported by external social care professionals who were consulted appropriately and any guidance provided included within peoples support plans. A care professional commented, "Whenever I am in contact with Southview I am put in contact with the appropriate carer who knows the individual resident well. This never ceases to surprise me (in a good way!) given varying shift patterns."
- People's relatives said their family members were supported by trained staff who knew how to keep them safe. One family member told us, "The quality of care for [relative] is fantastic. The staff are very caring and understand their needs."
- Regular servicing of equipment and safety checks were completed to help keep people safe. For example, regular fire safety and hot water temperature testing.

#### Staffing and recruitment

- Safe recruitment procedures were in place.
- All required employment checks had been carried out prior to staff commencing their employment. Disclosure and Barring Service (DBS) checks were completed. These provide information including details about any convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Sufficient numbers of staff were available to meet the individual needs of people. Staffing numbers had

recently been increased to meet the changing needs of people using the service.

• People's relatives told us the service provided consistent, reliable support for their family member.

#### Using medicines safely

- Systems were in place to help manage people's prescribed medicines. An organisational quality audit took place on the day of our inspection covering all aspects of medicine storage and safe administration.
- Medicines were stored safely and securely. Staff responsible for administering medicines received the appropriate training.

#### Preventing and controlling infection

- 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.

#### Visiting in care homes

• The service followed current guidance on visiting in care homes.

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. Any conditions related to DoLS authorisations were being met.
- Staff were able to demonstrate their understanding of capacity and consent and how they supported and enabled people to make their own decisions and choices, in a way they understand.
- A care professional commented, "I have led a recent best interest meeting regarding a resident which was arranged by [the registered manager] and included all appropriate professionals leading to the best outcome for the resident."



### 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. The rating for this key question 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, Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The service promoted an open and inclusive culture, involving people and those important to them, with clear, achievable outcomes for people.
- Relatives were positive about the way the service was run. One family member commented, "The staff I meet and those that regularly telephone me are all very kind, supportive and are totally committed to the care they give [person] and the other residents". A care professional told us, "Southview is led in outstanding fashion by [registered manager] who has an overarching view of what is happening with all residents."
- Staff felt involved and included in decisions about the service and the support provided. Staff told us the home provided high quality person centred care and support.
- Regular team meetings were held, as well as regular communication with families so everyone was informed and involved.

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

- There was a clear organisation structure in place with lines of accountability and staff understood their roles and responsibilities.
- Staff spoke positively about working at Southview Close and the support they received from the registered manager. One staff member told us, "The manager is very supportive."
- Positive comments were also received from family members about the management and staff at the service. One relative commented, "We are extremely happy with the level of care for [person]. [Registered manager] keeps me up-to-date about [person].

Working in partnership with others

- Care staff worked collaboratively with medical, health and social care professionals and followed their instructions when supporting people with their healthcare needs.
- Feedback received from a care professional involved with the service included, "When asked, carers are able to use appropriate monitoring equipment to give me extra information regarding residents and always have information to hand, either through their own knowledge or by use of the communication book. The staff work hard to meet the needs of the residents."

Continuous learning and improving care

- A range of quality audits were carried out to monitor and ensure the quality of service provision. These included both internal and external checks around areas such as medicines, health and safety and support planning.
- Development plans focused on the aims and objectives the service had for the forthcoming year.