

Review of compliance

MacIntyre Care Southview Close

Region:

London

Location address:

1 Southview Close
Rectory Lane, Tooting
London
SW17 9TU

Type of service:

Care home service without nursing

Date of Publication:

September 2011

Overview of the service:

Southview Close is a care home for 12 adults with learning disabilities, some who also have a physical disability. The home is registered to provide personal care and is managed by MacIntyre Care.

Summary of our findings for the essential standards of quality and safety

Our current overall judgement

**Southview Close was not meeting one or more essential standards.
Improvements are needed.**

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 1 September 2011, observed how people were being cared for, looked at records of people who use services and talked to staff.

What people told us

The people we met during our visit were unable to communicate with us verbally.

Based on the information available we found that people who use the service led active lives, using the support of staff where necessary.

The staff showed commitment to ensuring people do the things they want to do, and them living their lives as independently as possible.

There was evidence at the service of different ways that people have been enabled to make choices about their lives and what they want to do.

What we found about the standards we reviewed and how well Southview Close was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

People who use the service are enabled and supported to make choices about their lives and how they want to spend their time.

Overall, we found that Southview Close was meeting this essential standard.

Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights

People who live at the home experience support with their needs. However, the potential risks to people's safety is not kept under review or updated in light of their changing needs.

Overall, we found that improvements were needed for this essential standard.

Outcome 07: People should be protected from abuse and staff should respect their human rights

Safeguarding risks to people who use the service are minimised through the systems in place, policies, and the training provided to staff.

Overall, we found that Southview Close was meeting this essential standard.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

People who use the service are cared for by a well supported staff team.

Overall, we found that Southview Close was meeting this essential standard.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

There are systems in place for the monitoring and development of the service to ensure that it is managed in the best interests of the people who use the service .

Overall, we found that Southview Close was meeting this essential standard.

Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential

Important information about support people have with their health and medication needs is not kept up to date and could put them at risk.

Overall, we found that improvements were needed for this essential standard.

Actions we have asked the service to take

We have asked the provider to send us a report within 14 days of them receiving this report, setting out the action they will take to improve. We will check to make sure that the improvements have been made.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. Any regulatory decision that CQC takes is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

Other information

Please see previous reports for more information about previous reviews.

**What we found
for each essential standard of quality
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- * Understand the care, treatment and support choices available to them.
- * Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- * Have their privacy, dignity and independence respected.
- * Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

Photographs on display throughout the home show people who use the service getting involved in parties, celebrations and outings. We saw evidence that people who use the service have opportunities to go on holiday each year to a place of their choosing and with people that they want to.

Some people see their relatives who visit and spend time at the service, or who take them out on day trips or for weekend stays at their home.

There are photographs of different drinks, meals and snacks that people can choose to have and we saw that the food is readily available for the choices available. Each day one person who uses the service chooses the main evening meal, and where able, helps the staff prepare this. People are also able to help themselves to fresh fruit throughout the day.

Other evidence

All staff we spoke to conveyed a caring approach towards the people who use the service. They told us about the different methods they use to communicate with each person, and we saw these being used when staff interacted with them. Further written guidance about each person's communication needs was included in their care files.

During our visit most people were out for the day, where staff had supported them to attend different day centres and their going out into the community. Each person has an activity plan for the week. All of these are individualised to the needs and wants of each person, and include social activities as well as times where they prefer to spend time on their own.

Our judgement

People who use the service are enabled and supported to make choices about their lives and how they want to spend their time.

Overall, we found that Southview Close was meeting this essential standard.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

There are moderate concerns with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

People who use the service are supported by the staff to maintain their physical and psychosocial health needs, and this is evidenced in the care plans and activities that people are involved in.

Other evidence

Staff have a good understanding of each person's needs and how to meet these. They told us that people who use the service have differing care needs, where some require more help with personal care, whilst others need support with areas such as using public transport, socialising and managing money.

Each person's needs and plans to meet these were recorded in their care files, and kept under review. We saw evidence to confirm that where people's needs change and they require the support of healthcare professionals, staff act upon this and seek relevant advice and support people to attend appointments.

Where any risks to people's safety has been assessed risk management plans have been developed to maximise their safety, in areas such as personal care support, medication assistance, making hot drinks and the person developing life-skills. Some of the risk management plans were dated, some up to four years ago, with no recent evidence of their having been reviewed or updated. Staff said that due to the long term needs of the people these are still relevant. However, they did acknowledge that they should be reviewed and amended in light of changes in the person's needs and abilities.

Our judgement

People who live at the home experience support with their needs. However, the potential risks to people's safety is not kept under review or updated in light of their changing needs.

Overall, we found that improvements were needed for this essential standard.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

We did not discuss this outcome with people who use the service.

Other evidence

Staff spoke confidentially about different types of abuse, how to identify possible signs of this, and the actions they would take if a safeguarding issue arose at the service. They said that they received regular training in safeguarding and we saw evidence to confirm this.

Safeguarding guidance was on display in the staff offices. The staff also had a good understanding of whistle-blowing and the policies regarding this.

Where the service manages the monies of people who use the service, we saw that the processes for this included two staff checking the monies at the beginning of each shift, with appropriate recording of transactions maintained.

Our judgement

Safeguarding risks to people who use the service are minimised through the systems in place, policies, and the training provided to staff.

Overall, we found that Southview Close was meeting this essential standard.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

The staff told us that they feel there is a good 'team spirit' at the home, which makes it a nice place to work, and for them to provide a good level of support to the people who use the service.

We observed staff being respectful and supportive towards the people who use the service.

Other evidence

Staff told us that they get good support from the team and the manager of the service. We saw evidence of regular team meetings and one-to-one supervision sessions between the manager and staff.

The staff said that they get relevant training to meet the needs of the people who use the service, and they showed us certificates to evidence training they had done in areas such as fire safety epilepsy awareness, dementia care, managing challenging behaviour and medication awareness.

There is an induction programme that includes training, orientation to working for the organisation, and to working with the people who use the service.

Our judgement

People who use the service are cared for by a well supported staff team.

Overall, we found that Southview Close was meeting this essential standard.

Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us

The care files show that people who use the service are involved in choosing what activities they want to do and how they want their care to be given.

Other evidence

The staff told us about the staff council meetings that are run by MacIntyre Care, where staff representatives from each service meet with the Workforce Development Manager and discuss ways of improving the service for the people. Southview staff showed that as a result of recent meetings, they were enabled to purchase a new gazebo for the garden.

On display in the office area we saw that a service plan had been developed, identifying different goals for the service throughout the 2011/12 period. This included goals for increased staff support, health and safety and the development of person centred planning for the people who use the service.

Records held at the service demonstrate that routine health and safety checks are carried out, as well as regular checks on fire systems and equipment. Any incidents or accidents involving people who use the service are recorded, and the CQC are notified of relevant incidents that have occurred at the service.

There was an accessible complaints procedure on display, with photographs of who people need to contact if they have any concerns about the service. There were no records of any recent complaints having been received by the service.

Our judgement

There are systems in place for the monitoring and development of the service to ensure that it is managed in the best interests of the people who use the service .

Overall, we found that Southview Close was meeting this essential standard.

Outcome 21: Records

What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

- * Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.
- * Other records required to be kept to protect their safety and well being are maintained and held securely where required.

What we found

Our judgement

There are moderate concerns with Outcome 21: Records

Our findings

What people who use the service experienced and told us

We did not discuss this outcome with people who use the service

Other evidence

The risk management plans for each person were all held together in a large lever-arch file, which made finding important information about people confusing and time-consuming.

Similarly, some of the information in the risk management plans referred to other care documents that did not exist in the person's care file. An example of this is in the risk management plan for one person, where it states: '...staff must ensure they have read the behavioural support plan and follow guidelines in place..'. The staff we spoke to were also unable to locate this support plan.

Each person has a hospital 'passport' that can be easily accessed should the person need emergency treatment. However, these too were dated from approximately three years ago, and do not hold the most current information about people's health and medication support needs.

Our judgement

Important information about support people have with their health and medication needs is not kept up to date and could put them at risk.

Overall, we found that improvements were needed for this essential standard.

Action we have asked the provider to take

Compliance actions

The table below shows the essential standards of quality and safety that **are not being met**. Action must be taken to achieve compliance.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care	Regulation 9 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 04: Care and welfare of people who use services
	How the regulation is not being met: People who live at the home experience support with their needs. However, the potential risks to people's safety is not kept under review or updated in light of their changing needs. Important information about support people have with their health and medication needs is not kept up to date.	
Accommodation for persons who require nursing or personal care	Regulation 20 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 21: Records
	How the regulation is not being met: Important information about support people have with their health and medication needs is not kept up to date and could put them at risk.	

The provider must send CQC a report that says what action they are going to take to achieve compliance with these essential standards.

This report is requested under regulation 10(3) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

The provider's report should be sent to us within 14 days of this report being received.

Where a provider has already sent us a report about any of the above compliance actions,

they do not need to include them in any new report sent to us after this review of compliance.

CQC should be informed in writing when these compliance actions are complete.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

Document purpose	Review of compliance report
Author	Care Quality Commission
Audience	The general public
Further copies from	03000 616161 / www.cqc.org.uk
Copyright	Copyright © (2010) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA