Inspection Report

We are the regulator: *Our job is to check whether hospitals, care homes and care services are meeting essential standards.*

Canterbury Road

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We inspected the following standards as part of a routine inspection. This is what we found:

Respecting and involving people who use services	✓ Met this standard
Care and welfare of people who use services	✓ Met this standard
Safeguarding people who use services from abuse	✓ Met this standard
Supporting workers	✓ Met this standard
Assessing and monitoring the quality of service provision	✓ Met this standard

Details about this location

Registered Provider	London Borough of Merton
Registered Manager	Mr. Patrick Joseph Finn
Overview of the service	Canterbury Road provides short term personal care and support services to people in their own homes. People who receive care and support from this service need immediate help and assistance following discharge from hospital or who are in need of crisis care
Type of service	Domiciliary care service
Regulated activity	Personal care

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Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We looked at the personal care or treatment records of people who use the service, carried out a visit on 3 January 2013, talked with people who use the service and talked with staff.

What people told us and what we found

People who received personal care and support from this service either required help or assistance following discharge from hospital or were in need of crisis care. The majority of people using this service received care and support for a maximum period of six weeks. Senior staff worked closely with care managers from the local authority during this period to review and assess people's ongoing care and support needs, with the aim of helping people to regain their confidence to live independently or to move on to a longer term package of personal care and support from another provider.

We spoke with two people using the service. Both people we spoke with told us they had copies of their care plans in their homes and were aware of the care and support that had been planned for them. They told us staff were 'friendly', 'helpful' and treated them with respect. One person said about the service 'I wouldn't change anything. They are here to help me to get confident about living independently'.

Staff had received training to keep their skills and knowledge up to date. They were aware about what they should do to protect people who may be at risk of abuse, harm or neglect.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases

we use in the report.

Our judgements for each standard inspected

Respecting and involving people who use services ✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care. People's dignity and independence were respected.

Reasons for our judgement

One of the people using the service told us staff treated them and their home with respect. They said staff always asked permission before they did anything around the home.

People who use the service understood the care and treatment choices available to them. People were supported in promoting their independence. The registered manager told us the service provided short term personal care and support to people in their own homes for a maximum period of six weeks. People using the service had either been discharged from hospital or were in need of crisis care. The manager said people's care and support needs were reviewed during this period with people using the service and where appropriate their representatives to assess their progress and to determine whether they were able to live independently at the end of the planned package of care or whether they needed to move to a longer term package of care and support from another provider.

We looked at the records of three people using the service. We saw people, and where appropriate their representative, had been involved in the initial assessment of their care and support needs. We saw people had been able to express their specific preferences about the care and support that was delivered. We saw one example where someone's specific dietary preferences formed part of their planned care and support. We also saw in another example, instructions for staff to encourage and support a person to live independently.

We looked at the information provided to people using the service. The registered manager told us each person using the service had a copy of their care plan in their homes. People also had access to daily notes kept by staff after each visit detailing the care that had been delivered. There was also information for people about who to contact in an emergency. However we established that people using the service were not routinely provided information about how they could make a complaint about the service if they were not happy. The provider may wish to note people were at risk of experiencing poor care as they were not informed of their right to raise any issues or concerns they had with the care and support they received.

Care and welfare of people who use services ✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

Reasons for our judgement

People's needs were assessed and care and treatment was planned and delivered in line with their individual care plan. We spoke with two people using the service. One person told us 'The service is very good. They always come on time and they do all that you want'. Another person said about the service 'They are fine and I'm alright'. Both people we spoke with told us they had a copy of their care plan in their homes and were aware of the care and support that had been planned for them.

We looked at the records of three people using the service. We saw people's initial care and support needs had been assessed by a care manager from the local authority. This information had been used by the service to plan the short term care and support needed by people. Although we observed information was basic and task specific, there was enough information and guidance for staff about people's specific care and support needs for each planned visit. Where risks had been identified to people's health, safety and wellbeing, risk assessments had been carried out to identify how these would be managed and mitigated by staff.

We spoke with four members of staff who told us during every visit to a person's home, they read people's care plans to ensure they delivered the care and support that had been planned. We also saw from peoples' records that daily notes were completed by staff which detailed the care and support they had delivered at each visit. Staff said this helped them to keep up to date with people's changing needs, progress and any issues or concerns.

Safeguarding people who use services from abuse ✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

Reasons for our judgement

We spoke to people using the service but their feedback did not relate to this standard.

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening. We spoke with four members of staff who all told us they had received training in safeguarding of vulnerable adults. We looked at staff training records and saw this had been delivered within the last twelve months to most of the staff working in the service. Staff explained to us the types of abuse that could occur, the signs that they would look for and what they would do if they thought someone was at risk of abuse, harm or neglect. They told us they would report any concerns they had, to their line manager, or to other senior staff in their absence.

The registered manager told us any concerns raised by staff would be reported immediately to the local authority's safeguarding team.

Supporting workers ✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Reasons for our judgement

We spoke with two people using the service. One person told us staff were 'very good'. Another person said 'the girls are friendly and very helpful'.

Staff received appropriate professional development. We looked at the service's training records and saw that staff had received recent training in safeguarding of vulnerable adults, tissue viability, medications and moving and handling. The registered manager told us the service had experienced difficulty in securing places for staff to attend external training specific to their roles. To address this, they said the service had developed it's own training programme for staff which will be rolled out this year and will cover specific areas such as; first aid, infection control, health and safety, fire training, safeguarding vulnerable adults, control of substances hazardous to health (COSSH) and equality and diversity. Senior staff had already been trained to deliver this training to staff working within the service.

We spoke with four members of staff who told us they received regular training to support them in their roles. They said they had yearly appraisals and a monthly supervision meeting with their line manager where they could discuss any issues and concerns they had. Most staff said they felt supported by their immediate managers and could approach them with any issues or concerns they had. All the staff we spoke with told us how much they enjoyed their work.

Assessing and monitoring the quality of service provision ✓ Met this standard

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

Our judgement

The provider was meeting this standard.

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people who use the service and others.

Reasons for our judgement

We spoke with two people using the service. One person told us if they were not happy with any aspect of the service they would telephone the manager. Another person said 'I would definitely say something if I were not happy'.

People who use the service, their representatives and staff were asked for their views about their care and treatment and they were acted on. The registered manager told us senior staff monitored the quality of service provided by undertaking visits to people's homes to check on the care and support delivered by staff. We looked at a number of 'support and guidance forms' which had been completed by senior staff following these visits. We saw checks had been carried out to ensure staff had; read, understood and delivered people's planned care and support needs, completed documentation correctly and been appropriately dressed. The registered manager said these checks were carried out for each member of staff every three months.

The registered manager also told us people using the service were asked for their feedback as they neared the end of their planned package of care and support. They said people were provided with questionnaires and completed questionnaires were analysed by senior staff within the provider's organisation. They said any issues or learning from these were fed back to the service.

Decisions about care and treatment were made by the appropriate staff at the appropriate level. Senior staff worked with other healthcare professionals to review and make decisions about the current and future care and support needs of people using the service. The registered manager told us senior staff undertook reviews with people using the service during their planned period of care to assess their progress and ongoing needs. They said this information was discussed at weekly meetings with care managers from the provider's organisation to identify any issues or concerns and to make decisions about people's current and future care and support needs.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social 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 essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of dentists and other services at least once every two years. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ **Met this standard**	This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.
✖ **Action needed**	This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.
✖ **Enforcement action taken**	If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. This could be a minor, moderate or major impact.

Minor impact – people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact – people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact – people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)
Consent to care and treatment - Outcome 2 (Regulation 18)
Care and welfare of people who use services - Outcome 4 (Regulation 9)
Meeting Nutritional Needs - Outcome 5 (Regulation 14)
Cooperating with other providers - Outcome 6 (Regulation 24)
Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)
Cleanliness and infection control - Outcome 8 (Regulation 12)
Management of medicines - Outcome 9 (Regulation 13)
Safety and suitability of premises - Outcome 10 (Regulation 15)
Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)
Requirements relating to workers - Outcome 12 (Regulation 21)
Staffing - Outcome 13 (Regulation 22)
Supporting Staff - Outcome 14 (Regulation 23)
Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)
Complaints - Outcome 17 (Regulation 19)
Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

Contact us

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