

Review of compliance

MacIntyre Care Anvil Close	
Region:	London
Location address:	21-24 Anvil Close Streatham London SW16 6YA
Type of service:	Care Home Service without Nursing
Date the review was completed:	June 2011
Overview of the service:	<p>Anvil Close is a care home service without nursing providing accommodation and personal care for up to twelve people with learning disabilities.</p> <p>The home is situated on a residential street and is within reach of local shops and public transport links.</p>

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

What we found overall

We found that Anvil Close was not meeting one or more essential standards. Improvements are needed.

The summary below describes why we carried out the 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 8th June 2011, talked to people who use the service, talked to staff and the manager, checked the provider records and looked at records of people who use services.

What people told us

People told us that they like living at the home, and that they can make choices about their daily lives, what they want to do and what they want to eat. People get the right support to meet their needs and develop independence in their lives. People like the fact that the environment is calm and relaxed.

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

Outcome 1: 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 supported to make positive choices about their lives and to pursue their individual interests.

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

Outcome 2: Before people are given any examination, care, treatment or support, they should be asked if they agree to it

The service has systems in place to support people to make decisions about their treatment and support.

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

Outcome 4: People should get safe and appropriate care that meets their needs and supports their rights

People who use the service experience appropriate support and risks to safety are managed.

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

Outcome 5: Food and drink should meet people's individual dietary needs

People who use the service are supported to have adequate nutrition, where they are able to make food choices that they like, and which meets their needs.

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

Outcome 6: People should get safe and coordinated care when they move between different services

The service seeks advice from relevant health and social care professionals to support the needs of the people who use the service.

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

Outcome 7: People should be protected from abuse and staff should respect their human rights

Risks to people who use the service are minimised by appropriate training and procedures.

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

Outcome 8: People should be cared for in a clean environment and protected from the risk of infection

Improvements are needed to ensure the home is clean and hygienic for the people who use the service.

- Overall we found that Anvil Close was meeting this essential standard but, to maintain this, we have suggested that some improvements are made.

Outcome 9: People should be given the medicines they need when they need them, and in a safe way

Staff are trained in the administration of medication and ensure this is given safely.

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

Outcome 10: People should be cared for in safe and accessible surroundings that support their health and welfare

The home is safe, comfortable and suitable for the people who use the service.

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

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment

The equipment available at the home is suitable to meet the needs of the people who use the service.

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

Outcome 12: People should be cared for by staff who are properly qualified and able to do their job

The service does not demonstrate that people who live at the home are supported by staff who have undergone appropriate pre-employment checks.

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

Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs

People who use the service are supported by sufficient levels of staff, and these are flexible dependent on people's needs.

- Overall, we found that Anvil 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

Staff have an induction, training and support to help them meet the needs of the people who use the service.

- Overall, we found that Anvil 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

The provider has systems in place to monitor the quality of the service.

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

Outcome 17: People should have their complaints listened to and acted on properly

There are appropriate systems to manage complaints.

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

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

Records relating to the people who use the service are accurate, up-to-date and appropriately stored.

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

Action we have asked the service to take

We have asked the provider to send us a report within 7 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.

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 1: 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 1: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us
We saw staff respecting people’s privacy, and interacting with people in a respectful way. People were able to get up when they wanted to and were supported by the staff who they had chosen. People could choose what meals they wanted to eat.

Other evidence
We saw some people being supported to pursue their busy programme of activities, being transported to different day centres and clubs whilst others were supported to go to the cinema or shops. Some people prefer to spend their time at the service, with occasional trips out for lunch and shopping.
The support plans showed that people are fully involved in planning their lives, with individualised weekly plans showing how they spend their time. People are involved in developing their support plans, which are person-centred and enhanced with photographs of what the person enjoys doing. The support plans tell us what each person likes and their dislikes. It also details the individual ways people communicate, and how staff need to communicate with them. We saw that staff used these methods when interacting with the people who use the service. The support plans clearly detail what each person is able to do for themselves and

where they need the support of staff. There is also information about people's diverse needs in relation to their religion and cultural background, and also their preferences for specific gender of staff to help them with their personal care.

The staff rota reflected that women are cared for predominantly by female staff with their personal care.

People's bedrooms were personalised with their own belongings, photographs and posters. Each person we saw was dressed in clean and appropriate clothing.

People could see who was working during the day by a notice board displaying photographs of the staff on duty.

Our judgement

People who use the service are supported to make positive choices about their lives and to pursue their individual interests.

Outcome 2: Consent to care and treatment

What the outcome says

This is what people who use services should expect.

People who use services:

- Where they are able, give valid consent to the examination, care, treatment and support they receive.
- Understand and know how to change any decisions about examination, care, treatment and support that has been previously agreed.
- Can be confident that their human rights are respected and taken into account.

What we found

Our judgement

The provider is compliant with outcome 2: Consent to care and treatment

Our findings

What people who use the service experienced and told us
We saw people being involved in decisions about what they wanted to do during the day.

Other evidence
People are involved in developing their care plans to demonstrate their involvement and agreement with their treatment and support. We saw that where people are unable to communicate their needs on specific issues, best interest discussions had taken place, involving key staff and relevant family members.
Staff undertake training the Mental Capacity Act 2005.

Our judgement
The service has systems in place to support people to make decisions about their treatment and support.

Outcome 4: 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

The provider is compliant with outcome 4: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us
People told us that they are involved in different activities that they have chosen, and that staff supported them with these, where necessary. They said that if some days they do not feel like doing something they can tell the staff and choose to do something else instead.

Other evidence
Care plans reflected the support being provided, as well as where people are encouraged to be independent in their lives and decision making. The care files contained detailed assessments of potential risks to people’s safety and how these will be managed, such as when how the person is supported with activities and in the community. These include support from other providers, such as the groups and clubs that people attend, and the management of any risks while the person is with them.
Staff told us about the person-centred approach to managing risks, that takes place with each person. We saw records to confirm this, along with observations of the day, where people were pursuing individual activities independently or with support, depending upon the risk assessment.

Our judgement
People who use the service experience appropriate support and risks to safety are managed.

Outcome 5: Meeting nutritional needs

What the outcome says

This is what people who use services should expect.

People who use services:

- Are supported to have adequate nutrition and hydration.

What we found

Our judgement

The provider is compliant with outcome 5: Meeting nutritional needs

Our findings

What people who use the service experienced and told us
People said they can choose what they would like to eat for breakfast, lunch and dinner. We saw that people can each choose to have individual meals.

Other evidence
We saw a variety of fresh, frozen, tinned and dried foods available for the preparation of meals, as well as drinks and snacks that people could help themselves to throughout the day. The menu at the home is that of traditionally British meals, though people with specific cultural or religious dietary needs had meals specially prepared for them.
The care records contain information about peoples' preferences in relation to food and areas where they need support. Where people need more support with their nutritional needs, care plans have been developed which incorporate the advice of a dietician.

Our judgement
People who use the service are supported to have adequate nutrition, where they are able to make food choices that they like, and which meets their needs.

Outcome 6: Cooperating with other providers

What the outcome says

This is what people who use services should expect.

People who use services:

- Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

What we found

Our judgement

The provider is compliant with outcome 6: Cooperating with other providers

Our findings

What people who use the service experienced and told us
People said that they get good support in all areas of their life. The care records indicate that, when necessary, staff contact health and social care professionals to seek advice to support the changing needs of people who use the service.

Other evidence
Each person has a named key-worker who is responsible for co-ordinating their care, and seeking support from health and social care professionals. The care records contain guidance from dieticians and the Community Learning Disability Team to help staff meet the needs of different people who use the service. This information had been transferred into people’s care and health action plans to ensure they get the right support. We saw evidence that people are involved in reviewing and planning their care.

Hospital passports have been developed for each person, should they go into hospital at short notice. They contain important information relating to the person’s communication needs, personal care preferences, medical history and current treatment. Risk assessments to support people with their safety needs when at home or out in the community are detailed and kept under periodic review.

Our judgement
The service seeks advice from relevant health and social care professionals to support the needs of the people who use the service.

Outcome 7: 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 7: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us
People told us that they feel safe living at the service.

Other evidence
Each person has support plans relating to individual safety needs and areas of risk. Staff are provided with training in safeguarding people who use the service. There are policies regarding safeguarding and whistle blowing, and new staff are made aware of these during their induction to working at the home. Staff spoke confidently about the appropriate procedures they would take if whistle blowing, or to report any incidents of abuse.

Our judgement
Risks to people who use the service are minimised by appropriate training and procedures.

Outcome 8: Cleanliness and infection control

What the outcome says

Providers of services comply with the requirements of regulation 12, with regard to the *Code of Practice for health and adult social care on the prevention and control of infections and related guidance*.

What we found

Our judgement

There are minor concerns with outcome 8: Cleanliness and infection control

Our findings

What people who use the service experienced and told us
We saw adequate supplies of soap and hand towels for people to use to minimise infection.

Other evidence
There are currently no domestic staff employed at the home, and care staff said that they undertake the cleaning of the home. Staff told us they had completed training in food hygiene, health and safety and infection control, and we saw training records to confirm this.

We observed that the home was generally tidy, but that some additional deep cleaning was needed, as a number of carpets were stained. We also saw that where new kitchens had been installed, there were gaps where the linoleum did not reach the cabinets, which is an infection risk. The walls and radiators in some of the dining areas were in need of cleaning, as they had food and drink stains on them.

Our judgement
Improvements are needed to ensure the home is clean and hygienic for the people who use the service.

Outcome 9: Management of medicines

What the outcome says

This is what people who use services should expect.

People who use services:

- Will have their medicines at the times they need them, and in a safe way.
- Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement

The provider is compliant with outcome 9: Management of medicines

Our findings

What people who use the service experienced and told us
People told us that they receive the right treatment and medicines for their needs.

Other evidence
The medication is stored in each unit in a locked cupboard. Records indicate that people receive their medication as prescribed and show that staff have training in the administration of medication. The staff told us that they can only administer medication once they have completed this training. We saw that staff also have to complete an annual competency check to ensure that they can still give medication appropriately.

Our judgement
Staff are trained in the administration of medication and ensure this is given safely.

Outcome 10: Safety and suitability of premises

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are in safe, accessible surroundings that promote their wellbeing.

What we found

Our judgement

The provider is compliant with outcome 10: Safety and suitability of premises

Our findings

What people who use the service experienced and told us
We observed that people who use the service were relaxed and moving freely inside the home. There is a lift from the ground to the first floor and a garden which is accessible to all the people who use the service.

Other evidence
Anvil Close is purpose built and has been fully adapted for use by people who use wheelchairs. The home is on two floors and is divided into four flats, each with their own kitchen/dining room, lounges, toilets and bathrooms. All bedrooms are single occupancy, with tracking hoists to enable people to be mobilised into the bathrooms in two of the three bedrooms in both the of the downstairs flats. The décor and furnishings of the home are modern and generally well-maintained.

Records indicate that routine checks are carried out on all aspects of health and safety, such as fire risk, water temperatures, heating and electrical systems, within the home.

Our judgement
The home is safe, comfortable and suitable for the people who use the service.

Outcome 11: Safety, availability and suitability of equipment

What the outcome says

This is what people should expect.

People who use services and people who work in or visit the premises:

- Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
- Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement

The provider is compliant with outcome 11: Safety, availability and suitability of equipment

Our findings

What people who use the service experienced and told us
We saw people being supported with equipment to enable them to move around the home.

Other evidence
There is equipment to support the people who use the service, such as hoists, slings, bedrails, specially adapted baths and wheelchairs. The staff told us that all the equipment for use within the home is working, and that any defects are addressed promptly. Records indicate that the equipment is serviced and checked regularly. The training records indicate that staff are trained in moving and handling techniques, and that this training is updated annually.

Our judgement
The equipment available at the home is suitable to meet the needs of the people who use the service.

Outcome 12: Requirements relating to workers

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 staff who are fit, appropriately qualified and are physically and mentally able to do their job.

What we found

Our judgement

There are moderate concerns with outcome 12: Requirements relating to workers

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
We looked at the recruitment records for a number of staff employed at the home. We found that some checks are carried out, such as Criminal Records Bureau check, but there was little, or no evidence to demonstrate that references from previous employers are sought, or that proof of identity had been received for each member of staff.

Our judgement
The service does not demonstrate that people who live at the home are supported by staff who have undergone appropriate pre-employment checks.

Outcome 13: Staffing

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 sufficient numbers of appropriate staff.

What we found

Our judgement

The provider is compliant with outcome 13: Staffing

Our findings

What people who use the service experienced and told us
People said that they feel there are enough staff working at the home. There is a board on the ground floor of the home, which displays photographs of staff working each day, so that people know which staff to expect.

Other evidence
Staff said that they feel the staffing levels are comfortable to meet the needs of people who use the service. There is a rota that shows that there is a sufficient skill mix of staff working each shift, and extra staff working where the needs of people require this. The manager said that the rota and staffing levels are based on the needs of the people who use the service, their individual and core activities.

Our judgement
People who use the service are supported by sufficient levels of staff, and these are flexible dependent on people's needs.

Outcome 14: Supporting workers

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 workers

Our findings

What people who use the service experienced and told us
The staff told us that they get training to help them meet the needs of the people who use the service.

Other evidence
Staff described the induction process and we saw evidence to demonstrate that relevant training is provided to them to enable them in their role. Staff said that they feel the training has provided them with good skills to support the people, particularly the training in epilepsy, person centred planning and communication. Staff records indicate that training is provided to support them in their role, such as food safety, first aid and fire safety, and that this regularly updated.
Staff have periodic appraisal, and individual supervisions happen approximately once a month, though staff said they feel able to seek support from senior staff whenever they need to. We saw meeting minutes to evidence that team meetings take place regularly.

Our judgement
Staff have an induction, training and support to help them meet the needs of the people who use the service.

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
People told us that staff listen to them. Staff told us that people who use the service have an opportunity to provide feedback through their support planning and one to one work.

Other evidence
We observed evidence that there were regular checks of equipment and safety systems, such as the fire system and electrical systems. Incidents that occur at the home are monitored and steps taken to address these.

We saw evidence that people are consulted about the service, and their feedback recorded, with actions taken to improve people’s daily lives. MacIntyre Care has developed a quality audit system, which enables monitoring of services through an organisation-wide computer system, whereby senior managers can monitor all aspects of a service to ensure they are compliant with organisational goals that promote the safety, rights and wellbeing of the people who use the service.

Our judgement
The provider has systems in place to monitor the quality of the service.

Outcome 17: Complaints

What the outcome says

This is what people should expect.

People who use services or others acting on their behalf:

- Are sure that their comments and complaints are listened to and acted on effectively.
- Know that they will not be discriminated against for making a complaint.

What we found

Our judgement

The provider is compliant with outcome 17: Complaints .

Our findings

What people who use the service experienced and told us
People told us that they would feel comfortable to say about anything they are not happy with.

Other evidence
There is a complaints procedure at the service, which is in an accessible format for people to use.

A complaints record form is available for logging any complaints received and the actions taken as a result of these, such as a recent concern that initiated changes to the menu.

Our judgement
There are appropriate systems to manage complaints.

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

The provider is compliant 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, but observed that information relating to people who use the service is stored confidentially in the lockable office area.

Other evidence
Records relating to the service, people who use this, staff and the maintenance of the home were found to be clear and the information easily accessible.
We observed that the recording by staff in the daily care records is of an appropriate standard, detailing how the person has spent their day. The monitoring of the accuracy of records is also included in the quality monitoring audits of the service.

Our judgement
Records relating to the people who use the service are accurate, up-to-date and appropriately stored.

Action

we have asked the provider to take

Improvement actions

The table below shows where improvements should be made so that the service provider **maintains** compliance with the essential standards of quality and safety.

Regulated activity	Regulation	Outcome
Accommodation for persons who require nursing or personal care	12	Outcome 8: Cleanliness and infection control
	Why we have concerns: Improvements are needed to ensure the home is clean and hygienic for the people who use the service.	

The provider must send CQC a report about how they are going to maintain 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 within 7 days of this report being received.

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

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	21	Outcome 12: Requirements relating to workers
	How the regulation is not being met: The home does not demonstrate that people who live at the home are supported by staff who have undergone appropriate pre-employment checks.	

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 Adult 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

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