

Review of compliance

Homecare Partners Limited t/a Right at Home Right at Home (Sutton & Epsom)

Region:	London
Location address:	Suite A, First Floor Old Inn House, 2 Carshalton Road Sutton Surrey SM1 4RA
Type of service:	Domiciliary care service
Date of Publication:	May 2012
Overview of the service:	Right at Home (Sutton & Epsom) provides personal care and support services to people in their own homes. The agency's office is located in Sutton close to amenities and transport links.

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

Our current overall judgement

Right at Home (Sutton & Epsom) was meeting all the essential standards of quality and safety inspected.

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 May 2012, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

We spoke with people who use the service and their representatives to find out what people thought about the quality of care and support they received. One person said they were 'delighted' with the service they received as 'they did exactly what I wanted'. People told us they had been able to choose the level of care and support they wanted and were involved in developing their care plans. One person told us 'It was very much up to me with the facts they presented what the options were for care and support'. Another person told us 'My care plan is on the table in front of me and I've been involved with it from the beginning'.

People felt safe and well looked after. One person told us 'I feel safe at home'. Another person said about their relative 'I haven't got any fears and worries. I go out with confidence that they are fine'. People felt that staff that looked after them or their relative were well trained, friendly and competent. One person said 'Staff are very helpful. I cannot speak highly enough of them'. Another person told us 'they make sure I'm moving safely around the house'. Another person said 'they are kind and attentive and I rate them well'. People told us their views about the service were sought and acted upon. One person said 'They have popped in to see me to check if there was anything I needed and to make sure that things are going ok'. Another person told us 'The opportunity is there all the time to give feedback and to talk to someone'.

What we found about the standards we reviewed and how well Right at Home (Sutton & Epsom) 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's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

People were involved in developing their care plans and their specific choices and preferences about how they were looked after and cared for had been taken into account.

The provider was meeting this standard.

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

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

Care plans have been developed and implemented that detailed the specific care and support needs of people that use the service. Staff had been given clear instructions and guidance on how to care for and support people to meet these needs. These needs were being met by staff.

The provider was meeting this standard.

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

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.

The provider had made appropriate checks on the suitability and skills of staff to work for the service. They had also ensured that all staff employed by the service were given the necessary information needed to help them identify and report any incidents of potential abuse or harm to people using the service.

The provider was meeting this standard.

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

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

The provider had put in place systems to ensure that staff had the skills and training needed to provide safe and appropriate care to people who use the service. This included personal development plans for all staff that identified their specific training needs and implementing supervision meetings with staff to review their performance.

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

The provider had measures in place to encourage and obtain feedback from people who use the service, their representatives and its own staff about the quality of service provided. It had also put in place its own system for reviewing the quality of service it provides and had taken action to make changes where it had been identified improvements were needed.

The provider is meeting this standard.

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.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that 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.

A moderate impact means that 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.

A major impact means that 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.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

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

People who use the service and their representatives told us they were given detailed information by the service about the care and support choices available to them. One person said 'They were really open to doing what I wanted – I was very impressed'. Another person told us they were given lots of information to help them make a decision about choosing this service. They said 'I chose them as I thought they were the best for me'. People told us staff were very friendly and professional. One person said 'You get treated with respect. I was asked how I wanted to be addressed'.

Other evidence

People expressed their views and were involved in making decisions about their care and treatment.

People who use the service understood the care and treatment choices available to them.

We looked at 4 people's care plans and saw that the service had carried out detailed needs assessments with people and their representatives prior to using the service. The assessments were comprehensive and from them we could see that people were able to state their personal choices and preferences for care and support. This included people's specific preferences for help with eating, drinking and personal care.

Information about people's personal interests was recorded. People's hopes and aspirations from receiving care and support were also noted.

We observed from people's care plans that the provider had completed mental capacity assessments to identify whether people who use the service had the capacity to make decisions relating to their care and support. The provider told us that all the people that used the service were able to make these decisions.

We were supplied with a copy of the service user guide. This is given to people before they start to use the service. The guide gives people information about the service including, how people can contact the service, the level of service that people can expect to receive, how the service will maintain its own standards including gaining people's feedback, how the service will assess people's needs to decide what care and support they need, the type of care and support that is available to people, information about fees and how people can comment or complain about the service.

Our judgement

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

People were involved in developing their care plans and their specific choices and preferences about how they were looked after and cared for had been taken into account.

The provider was meeting this 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

The provider is compliant 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 and their representatives told us the care and support they received met their needs. One representative said about their relative 'All their needs were taken into account and they have done a superb job in meeting these'. Another person told us 'They cover my day to day needs very well'. Representatives also told us that the daily notes written by staff after each visit provided valuable information to them about the welfare and wellbeing of their relatives. Another person told us they felt 'comfortable' as they knew that the member of staff providing their care and support had the appropriate experience.

Other evidence

Peoples' needs were assessed and care and treatment was planned and delivered in line with their individual care plan.

We looked at 4 people's care plans and saw these were person centred and comprehensive. Care plans had been written in the first person and gave detailed information about the things that were important to people using the service. These included existing medical conditions, details of family members and pets and people's preferred routines from the moment they wake up, to when they go to bed. There were clear instructions about people's food and drink preferences as well as their personal care routines. Other routines are also detailed and any risks attached to these are listed. There was a risk assessment in each person's plan which detailed all the potential risks identified within people's homes and what action must be taken by staff to minimise these risks. The risk assessment also listed any risks identified with

people's current lifestyle.

We saw from written notes completed by staff after each visit to someone's home, that care and support was being delivered as identified in people's care plans. For example we saw from one person's care plan that they liked to eat soup and sandwiches for lunch at a specific time every day. We saw from the written notes that staff had met this need each day.

Our judgement

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

Care plans have been developed and implemented that detailed the specific care and support needs of people that use the service. Staff had been given clear instructions and guidance on how to care for and support people to meet these needs. These needs were being met by staff.

The provider was meeting this 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

People who use the service and their representatives told us they felt safe when receiving care and support from staff in their homes. One representative told us they were initially cautious about staff providing care to their relative. However they were able to discuss their concerns with the service which the service took on board and they were happy with the level of care they provided. They also told us that they felt staff were 'trustworthy'. Another representative told us that staff had given advice to their relative on how to avoid doorstep scams.

Other evidence

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 looked at the records for 4 members of staff and saw that appropriate checks had been made by the provider to verify their suitability to work. These included checks on identity, CRB clearances, references and evidence of qualifications and skills.

We were told by the provider that all staff received a carer's handbook when they joined the service. We looked at the handbook and saw that this contained comprehensive policies and procedures for customer care, staff conduct and safeguarding and safety, which included the safeguarding vulnerable adults and whistleblowing policy, mental capacity policy and moving and handling policy. The safeguarding policy gave staff detailed information about the types of abuse and signs which could indicate possible

abuse. It also stated what staff must do if they suspected abuse including who they should report this to. The provider told us that no new members of staff had been allowed to provide care and support to people in their homes until they had completed their induction and passed all necessary recruitment checks.

We saw displayed on the wall of the office the procedure for staff to follow to report any concerns they have about potential abuse or harm. This contained the appropriate contact numbers for staff to call.

Our judgement

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.

The provider had made appropriate checks on the suitability and skills of staff to work for the service. They had also ensured that all staff employed by the service were given the necessary information needed to help them identify and report any incidents of potential abuse or harm to people using the service.

The provider was meeting this 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

People who use the service and their representatives told us staff were friendly, helpful and competent. They told us they were able to meet staff before they started providing care and support to decide if they liked them. One representative said the service had matched the member of staff with their relative 'perfectly'. They told us they had noticed a positive change in their relative since the member of staff had been providing care and support including an improvement in their self esteem and general appearance. They said they would rate the member of staff's skills as '110%'. Another representative told us they felt staff were very nice and had the skills to look after their relative. One person told us staff 'care about what goes on'.

Other evidence

Staff received appropriate professional development.

We looked at the records for 4 members of staff and saw that these contained information about their qualifications, skills and the training they had received to date. On one staff record we saw they had completed training in manual handling, safeguarding, fire safety and resident centred care within the last 6 months. On another staff record we saw they had received training in food safety, safeguarding, care induction and safe administration of medication training in the last 6 months. We saw that staff had personal development plans which gave details of their specific individual learning and training needs. The provider told us that staff had supervision meetings with their manager. We saw from 1 staff record that a review meeting had taken place in April 2012 and that training and development needs had been discussed with the member of staff to support them in their role.

The provider told us that there was an ongoing programme of training for all staff. We saw displayed on the wall in the office, details of planned training courses over the next 2 months for staff in safeguarding of vulnerable adults, moving and handling, first aid and food hygiene.

Our judgement

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

The provider had put in place systems to ensure that staff had the skills and training needed to provide safe and appropriate care to people who use the service. This included personal development plans for all staff that identified their specific training needs and implementing supervision meetings with staff to review their performance.

The provider was meeting this 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

People who use the service and their representatives told us that the service checks with them regularly that they are happy with the care and support being provided. One person told us that senior staff had visited with them to make sure things were going well and they were happy with the care and support they'd received. People said they had been asked for their feedback by the service. One person told us 'I have no suggestions for changes or improvements. Everything is fine and I haven't had cause to complain'. One representative said they felt comfortable raising issues with the service and that the service had responded positively to these.

Other evidence

People who use the service, their representatives and staff were asked for their views about their care and treatment and they were acted on.

We saw from 1 person's care plan the service had undertaken a review of the care and support it provided. This review had been undertaken with the person receiving care and support and their representative. From this review the service changed the care and support plan to improve the overall wellbeing of the person receiving the service.

We observed from staff records that through supervision meetings, staff were encouraged to give their views on how care and support can be improved for people that use the service.

We saw that the service user guide encourages people who use the service to tell the

provider what they think about the support they get. People are told they can make their views known in a variety of ways, including talking to staff, or contacting the service by telephone, letter or email. People are also told how long the service will take to respond to any complaints that they may make. The provider told us that since the service started, they had received no complaints from people that use the service or their representatives.

The service had implemented an internal quality monitoring system. An audit of the service's policies and procedures was undertaken on 13 April 2012 and from this an action plan for improvement was identified. We saw from this plan that the service had taken the appropriate steps to meet all the recommendations made by the 27th April 2012.

Our judgement

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

The provider had measures in place to encourage and obtain feedback from people who use the service, their representatives and its own staff about the quality of service provided. It had also put in place its own system for reviewing the quality of service it provides and had taken action to make changes where it had been identified improvements were needed.

The provider is meeting this standard.

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.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. 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

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