

# Review of compliance

Aikmo Medical Limited Peregrine House	
<b>Region:</b>	Yorkshire & Humberside
<b>Location address:</b>	48-52 Upgang Lane Whitby North Yorkshire YO21 3HZ
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	November 2011
<b>Overview of the service:</b>	Aikmo Medical Limited operate Peregrine House. They are registered to provide accommodation for persons who require nursing or personal care. It can accommodate up to thirty people who require personal care only. The home is situated on the outskirts of Whitby. The manager of this service is Alison Bedford.

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

## Our current overall judgement

**Peregrine House was meeting all the essential standards of quality and safety.**

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 14 September 2011, observed how people were being cared for, looked at records of people who use services, talked to staff, reviewed information from stakeholders and talked to people who use services.

### What people told us

People said they were consulted about their care, treatment and support options. They told us their views were sought and acted upon about every aspect of how the home was operated so they felt they were central to all the decisions being made. One person said 'I have signed to say I agreed to the care and support that I receive'. Another person said 'The proprietor and manager ask for my views regularly. They look after me well'.

The people we spoke to said that they received the help and support they needed when they wanted it. One person said 'The staff are marvellous. The care staff really do look after me. If I need help, they say that is alright it is no trouble at all'. Another person said 'The staff are very good. The staff know what I need a hand with. I can do what I want to maintain my independence'.

People we spoke to said they knew how to raise issues if they had any concerns. One person said 'I would feel happy to raise any issue. I feel safe here'. Another person told us 'The staff are gentle and kind. I know if I had any concerns they would be dealt with straight away'.

People said that there was enough staff available to help them. One person said 'The staff have the skills they need to be able to look after me'. Another person said 'I am very happy with how things are. The staff take good care of me'.

People told us that they could speak to the manager, deputy manager or proprietors. They said their views were actively sought about all aspects of how the home was run. One person said 'The proprietor's talk to me. They work hard to see that everything is just right.'

I cannot find fault with this service at all. I really appreciate living here'. Another person said 'The quality of the service is very good, nothing is too much trouble'.

## **What we found about the standards we reviewed and how well Peregrine House 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 human rights were being protected and their views were asked for and acted upon. People were treated with dignity and respect. Overall we found that Peregrine House was meeting this essential standard.

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

People had their health and welfare needs met. Overall we found that Peregrine House was meeting this essential standard.

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

People were looked after by staff who were aware about how to safeguard people from abuse. Overall we found that Peregrine House was meeting this essential standard.

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

People were supported by adequate numbers of staff who had the skills they needed to meet people's needs. Overall we found that Peregrine House 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**

People received a service which was constantly being monitored to make sure people's expectations and needs were being met. Overall we found that Peregrine House was meeting this essential 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.

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

People we spoke to confirmed that their rights were protected and that they were involved in making decisions about their care and support. One person said 'I decide what help and support I need. The staff respect my privacy and dignity. Another person said 'I can take risks to promote my independence which helps me to live the life I want'.

##### Other evidence

During our visit to this service the manager gave us a copy of their provider compliance assessment for this outcome. We looked at this. It told us that information was provided to all parties about the services they could provide to help meet people's needs. It said information was gathered before a person was admitted to the home by undertaking a pre admission assessment. It said that care plans and risk assessments were updated at least monthly with the person or their chosen representative so that people's needs and preferences were known and could be met. We were told that all parties had an opportunity to discuss the care, treatment and support that a person required so that they could agree to this support and give their consent to it.

The provider compliance assessment also said that people were encouraged to maintain their independence and make informed choices about activities that may have

risks attached to them. This helped to promote people's independence. We were informed by the manager that independent advocates could be provided for people. We saw that people received care and support in a way that met their individual, cultural and religious beliefs. Staff told us that they receiving training about how to protect people's equality diversity and human rights which helped to protect people. We saw the staff treating people with dignity and respect during our visit to this service.

We were informed that people were encouraged to voice their needs and look at their care plans with support and help if needed, so that changes could be made where appropriate. People we spoke to told us they had a 'Special day' each month where a senior member of staff goes to their room to review the person's care plans. These were gone through with the person and any family members who had responded to an invitation to be present for this review. This helped to ensure that people's care documentation continued to reflect their current needs and preferences. This was also the day that the staff try to make 'special' for people by asking them for their special requests. This could be an outing or to have a cream cake or special meal bought for them, which would be provided. People we spoke to said this helped them to feel valued and they said their wishes came true.

We were told by the people we spoke to that there were regular resident and relatives meetings so that they could give their views about the services being provided to them. The people we spoke to said they felt listened to and supported by the proprietors whom they felt genuinely wanted their feedback which made them feel they were at the centre of all decisions made about how the home was run.

### **Our judgement**

People's human rights were being protected and their views were asked for and acted upon. People were treated with dignity and respect. Overall we found that Peregrine House 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

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 told us they were happy with the service that they received. People said staff helped them to live the life they wanted. One person said 'The staff are marvellous when I ask for help it is no trouble. Staff come quickly when I need help'. Another person said 'I came and looked round before I moved in. The staff know what help I need and they make sure I get it'.

##### Other evidence

We spoke to people who were sat in the communal areas of the home. We were able to observe the interaction staff had with people. We visited two people in their own rooms and spoke to other people briefly as we walked around the home. We observed people having their lunch. We saw that staff were patient and kind to people offering them help and support whilst maintaining their privacy and dignity.

We observed people being cared for in the communal areas of the home. We saw that staff were patient and kind and they gently prompted people to make decisions about their care and support, so that people's needs were being met.

People we spoke to confirmed they were involved in creating their personalised care plans and risk assessments to make sure that their individuals needs and preferences were known and could be met. We saw that where risks were identified risk assessments took into account people's capacity to make decisions, whilst protecting their rights and choices to take informed risk. This helped to ensure people's independence and safety was promoted. People we spoke to told us they were asked

to read their care plans and risk assessments and sign to say that they agreed with their care and support being provided. We saw that reviews were undertaken monthly, or as the person's needs changed this was recorded as the person's 'Special day'. We saw that the person's key worker was responsible for reviewing the person's care. Staff then asked the person what they would like to do on their 'Special day'. This may be an outing or request to have a special meal brought in for them. The person's request was then provided. People we spoke with said they valued this. We also saw that during our visit that staff spent some quality time with people, this occurred several times. We saw that this interaction was recorded. This was known as 'Butterfly activity' and it was undertaken by all staff.

During our visit we inspected three people's care plans and risk assessments all were seen to be completed in enough detail and were personalised to people's individual needs so that their needs could be met. We spoke to the manager of this service she told us that she looked at these documents regularly along with her senior staff which helped to make sure that this documentation remained up to date and relevant to people's changing needs; so that people's needs would continue to be met.

The manager informed us that emergency procedures were in place which staff were aware of, this helped to make sure that people's health and wellbeing was being protected.

**Our judgement**

People had their health and welfare needs met. Overall we found that Peregrine House was meeting 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

People who used the service told us they were happy with the service that they received. One person said 'I would talk to the manager if I was not happy about something. I know things would be sorted out'. Another person said 'I feel safe here I am protected by the staff'.

##### Other evidence

The staff we spoke to told us that they received ongoing training about how to protect people from abuse. The manager told us that staff were reminded at their supervision of what action they needed to take if they suspected abuse may be occurring. She told us that there were policies and procedures in place and said issues of suspected abuse would be reported to the local authority for consideration under their safeguarding of adults procedures. This helped to make sure that people were being protected from abuse.

On our visit we asked staff about what action they would take if they suspected abuse was occurring. Three staff spoken to confirmed that they had received safeguarding training which included information about deprivation of liberty and the Mental Capacity Act (2005). Two of the three staff, when given a safeguarding scenario assured me that they would never leave a new carer with any person living at the home. All three said they would report any concerns straight away. All three knew what action they must take to help protect people from abuse. One member of staff said 'I would speak to the manager immediately. She would report the issue to the local authority and police if necessary'. All three said that they would feel comfortable about raising issues and said

issues would be dealt with thoroughly.

We saw that people's mental capacity needs had already been assessed which helped to protect people. She stated that she would refer people for their needs to be assessed as the need arose so that people's rights would continue to be protected. We spoke to the manager who informed us that people would be referred for a deprivation of liberty safeguard assessment to be undertaken. Information was available within the home about advocacy services that were available locally. This helped to protect people.

We were told by the manager that staff had proper checks carried out before they started work at the home. These included gaining references and undertaking a police check for new staff. This helped to make sure that staff were suitable to work in the care industry.

We spoke to a representative of North Yorkshire County Council who informed us that there were no concerns about this provider in relation to this outcome.

**Our judgement**

People were looked after by staff who were aware about how to safeguard people from abuse. Overall we found that Peregrine House was meeting this essential standard.

## 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 told us that they were satisfied with how the staff helped and supported them. They said that they felt the staff worked well as a team. One person said 'The staff are nice they look after me'. Another said 'The staff know what they are doing they look after me well. They are marvellous'.

##### Other evidence

We observed on our visit that there appeared to be enough staff on duty to meet people's needs in a timely way. The manager told us that a rota was prepared to make sure that there were adequate staff on duty, who were suitably qualified and competent to meet people's needs. The manager said if staff were unwell sometimes the numbers of staff could fall below what they would like to provide. However, she said that staff were happy to come into work at short notice and that staff worked as a team to make sure people's needs were met. The staff we spoke to said they were flexible and said that they did not mind coming in at short notice to help support people. The people we spoke to said that generally there was enough staff on duty to meet their needs.

We were told by the staff we interviewed that they felt there was plenty of training in place for them to develop their skills. One member of staff said 'I have just finished some training yesterday. I have received training in fire awareness, health and safety, moving and handling, dementia and safeguarding people from abuse'. Another member of staff said 'I have undertaken my National Vocational Qualification in Care at Level 3. There is training provided all the time which helps me develop the skills I need to be able to give good care and support to people'.

Staff we spoke to confirmed that staff meetings were held. One member of staff said 'The atmosphere in the home is always lovely. We have lovely people to look after. We are supported by the management team'. Another member of staff said 'The proprietors are great. Nothing is too much trouble for them. They show their appreciation to the staff all the time which gives me great job satisfaction.

**Our judgement**

People were supported by adequate numbers of staff who had the skills they needed to meet people's needs. Overall we found that Peregrine House 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

People living at the home who we spoke to said they were happy with the services they received. One person said 'I am asked for my views and I attend the meetings here with management. I have no complaints about any aspect of the service I am receiving at all'. Another person said 'The manager asks me if I am happy with things. I have had no reason to complain about anything'.

##### Other evidence

The manager informed us that the local authority undertook reviews of people who were funded by them so that they could see how the service was meeting people's needs. Any issues found would be dealt with to make sure that all parties continued to be happy with the service that they were receiving.

We saw that people had their care plans and risk assessments reviewed regularly. This care documentation was audited monthly to make sure that people had their 'Special day' and to make sure that people's needs continued to be met.

The manager told us that she undertook monthly audits to monitor all aspects of the service being provided these covered: falls and accidents, medications, infection control, notifications, suggestions comment and complaints. The nurse call system was also being monitored to make sure that it was efficient and notified staff of all the calls being made by people who required some assistance. The manager told us that any shortfalls found within any area of service being provided would have an action plan produced so that the situation would be monitored and be dealt with.

People we spoke to told us that resident and relative meetings were being held regularly. This helped to make sure that people's views were known and being listened to.

Staff told us that there was a clear structure of management in the home that was effective, which gave them confidence. They said they could raise issues or get advice from the management team at any time. Staff we spoke to confirmed that staff meetings were held so that they could raise their views. A member of staff said 'The atmosphere in the home is always lovely. We have lovely people to look after'. Another member of staff said 'The proprietors are great nothing is too much trouble for them, they show their appreciation to the staff all the time which gives me great job satisfaction'.

We saw that there was an ongoing programme of improvements planned for the home. Recently some new en suite bedrooms had been created and a new reception area. These had enhanced the facilities available in the home to make sure it remained a pleasant place for people to live in.

The proprietor told us how they always strive to develop their services. We saw that the Investors in People Gold award had been achieved in December 2010. We were told that Peregrine House was the only care home in the whole of the Yorkshire and Humberside region to have achieved this. We were told that they were now Investors In People Champions. We also saw that the staff at the home carried out regular fund raising events for national charities. We saw awards displayed in the entrance of the home from the Yorkshire and Humberside Care Awards. The person responsible for staff training at the home had been a finalist for the Trainers Award in 2010. We saw that the registered manager had received a 'Finalist' trophy for the Care Home Managers Award in 2009, 2010 and 2011. We were also informed that the proprietors were finalists for the Employer Award in 2010. This confirmed that great pride was taken in developing this service to its full potential.

The local authority was contacted for their views prior to our visit. We were informed that they had no concerns about any aspect of this service.

### **Our judgement**

People received a service which was constantly being monitored to make sure people's expectations and needs were being met. Overall we found that Peregrine House was meeting this essential 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.

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

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