

Review of compliance

Mrs Celia Rosemary Griffiths
Pippins Residential Care Home

Region:	South West
Location address:	Mead Lane Preston Paignton Devon TQ3 2AT
Type of service:	Care home service without nursing
Date of Publication:	April 2012
Overview of the service:	<p>Pippins is registered to provide accommodation for up to 21 people persons who require nursing or personal care. There is a condition attached to their registration that nursing care is not provided by the home, but this can be accessed via the district nursing service if required.</p> <p>The home is a large detached building</p>

	in close proximity to the town centre of Paignton.
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Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Pippins Residential Care Home 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 7 March 2012, carried out a visit on 13 March 2012, observed how people were being cared for, talked to staff and talked to people who use services.

What people told us

On the day of our visit the manager was on duty at the home and they showed us around the home and answered any questions we had.

We completed this review on the 7th and 13th March 2012. We spoke in private with two people living at the home, the manager, three staff, and one relative.

Staff told us how people were encouraged to make their own decisions, especially in relation to how they received the care they needed. We heard people being offered choices about how they wanted to spend their time. For example one gentleman was deciding whether or not to go outside as it was a warm morning, staff were heard supporting this decision and helped him with his coat.

We heard staff speaking with people in a kindly, friendly way and people that we spoke with confirmed that staff always treated them with respect. We saw staff respond promptly, discretely and sensitively to people when they asked questions or needed help. People told us "The staff are wonderful, anything I ask them to do it's no trouble", and "I am very happy living here, the staff are like my family".

We spoke with one relative, and they told us that the home always kept them informed about their relative's care and positively praised the care her mother received. She visited the home every day and said it was always the same, she said, "I could not recommend it enough, it is really lovely. The staff are fabulous they make my Mum laugh and they sing to her".

Each person had a care file that contained a range of documents relating to their care and

support needs. Each file we looked at contained detailed pre-admission assessments that included details of next of kin and some of the individual's preferences. A range of risk assessments had been completed including those for pressure areas nutrition and moving and handling.

During our visit we looked at the communal areas of the home and some bedrooms. Areas that we saw were very clean and tidy and there were no unpleasant odours.

The home works hard to try and provide the people living there with activities that they would really enjoy; recently a person living at the home had a hot air balloon ride accompanied by the manager over Torquay. Two weeks ago three people also enjoyed a trip to Goodrington for the afternoon, they were taken by taxi with staff to help them, this was funded by the home as are all trips and outings.

Staff told us that Pippins provided staff with a thorough ongoing training programme, which included mandatory training such as First Aid, Food Hygiene and Health and Safety as well as additional specialised training which related more directly to the individual needs of people who lived in the home such as dementia.

Staff that we spoke with told us that they had received training on safeguarding people and they were able to tell us about different types of abuse and what they would do if they suspected abuse was occurring.

Regular meetings are held for people that lived at the home (and people who support them) so that they could discuss any concerns they might have.

What we found about the standards we reviewed and how well Pippins Residential Care Home was meeting them

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

People who use the service and their relatives are involved in the planning of their care, treatment and support. People's privacy, dignity and rights are respected by staff.

Overall, we found that the service was meeting this essential standard.

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

People are fully involved in making choices and decisions about their care, when possible. There are good practices in place and staff make sure that they support and respect patient choice and that safe and appropriate care is delivered.

Overall, we found that the service was meeting this essential standard.

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

People are protected from abuse as the home acts to reduce individual risks, and staff are

up to date in safeguarding training.

Overall, we found that the service 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

Enough staff are employed to meet people's current health and welfare needs safely and consistently.

Overall, we found that the service 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 living at the home benefit from safe, good quality, care through the regular monitoring of the service.

Overall, we found that the service 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 told us that they made choices every day that included getting up in the morning, choosing their own clothes and whether or not to join in activities. We saw some information about people's preferences recorded in their care plans. We also saw some evidence in people's care plans that they had been involved in completing them.

People who used the service told us that staff treated them in a respectful manner and always attended to their personal care needs in private. They told us that staff would always knock on their bedroom doors and call them by their first names. We saw that personal interactions between people living and working in the home were respectful. Staff were careful to maintain people's dignity by ensuring that they had appropriate clothing and were well groomed.

People told us that staff were always polite, kind, and never rude.

Other evidence

Staff informed us that they respected people's privacy and dignity, and that all personal care needs were undertaken in private and with the doors closed. They told us that they knocked on people's bedroom doors and called them by their preferred names. Staff stated that they talked to people who used the service about their care, treatment and

support. They told us that they helped people to be as independent as they were able, and let them choose how they would like to be helped. Staff also told us that they respected people's diversity and their right to make decisions for themselves.

Our judgement

People who use the service and their relatives are involved in the planning of their care, treatment and support. People's privacy, dignity and rights are respected by staff.

Overall, we found that the service 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

During our visit to the home we spoke with two people living at the home and three staff in private. We also spent time observing the care being delivered to people and looked at some care records to see how people's care was planned.

We looked at the care records for three of the people who lived in the home to find out how the home had assessed their health and personal care needs, and how they planned to meet those needs. Each person had a care file that contained a wide range of documents relating to their care and support needs.

Each file we looked at contained detailed pre-admission assessments that included details of the next of kin. Files also contained detailed assessments about the person's communication, personal hygiene, pain, mobilising and eating and drinking. Social assessments were also completed that consisted of a 'pen picture' of the individual, important life events and any current social links.

All three files contained care plans that identified a person's needs, what outcome was wanted and the action plan to be followed in order to meet the identified needs. This information gave good directions to staff about how the person's needs were to be met. For example, one action plan stated 'has own insulin pen, but may need to be prompted.' A range of risk assessments had been completed including those for pressure areas nutrition and moving and handling.

Staff told us they were made aware of any changes to people's needs at regular

handovers and by looking at care plans. We saw evidence that care plans were regularly reviewed.

Information about visits from and to health care professionals had been recorded in individual care plans, showing clear evidence that people were supported to maintain access to specialist medical services. These included GPs and district nurses.

The home had not yet employed an activities organiser. Activities were provided by staff, we saw staff performing armchair exercises with some people in the lounge. They were clearly enjoying it as people were laughing and smiling throughout. People told us there was always something going on and they could pick and choose whether they joined in. Trips and outings were regularly planned and were often decided on by the people living at the home making suggestions. Trips were funded by the home.

Other evidence

We saw a comment made by a visiting physiotherapist who had visited the previous day, it said "Just keep doing what you clearly do very well. Its wonderful, lovely and relaxed with a clear focus on the autonomy of each resident".

Our judgement

People are fully involved in making choices and decisions about their care, when possible. There are good practices in place and staff make sure that they support and respect patient choice and that safe and appropriate care is delivered.

Overall, we found that the service 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

During our visit we saw staff interacting with people in a respectful and caring way. People told us that they would talk to the staff, manager or their families if they were unhappy about anything. We saw staff interacting with the people they support and providing opportunities for discussions. The staff listened to people's views and provided advice and guidance when appropriate. Staff we spoke with told us they knew the people they cared for well, and would be able to recognise if they were unhappy or upset but were not able to talk about their feelings.

Other evidence

Staff that we spoke with told us that they had received training on safeguarding people and they were able to tell us about different types of abuse and what they would do if they suspected abuse was occurring. We looked at the training records which confirmed staff were up to date with their protection of vulnerable adults training. Staff were aware of the home's policies and procedures in relation to safeguarding people.

Our judgement

People are protected from abuse as the home acts to reduce individual risks, and staff are up to date in safeguarding training.

Overall, we found that the service 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

The staff that we saw on duty on our visit had a good understanding of the people who lived at the home . We saw them communicating with people and supporting them with their care.

Sufficient staff were on duty to meet people's needs in a timely way. For example we saw people being given drinks when they asked for them and staff being able to take time to help people without rushing them.

Other evidence

Relatives told us that there were always enough staff on duty at the home. They stated that staff attended to their relatives promptly and that no one was left waiting for a member of staff to attend to them when help had been summoned.

The manager informed us that the staffing at the home was three carers for the morning and two for the afternoon and evening shifts, plus one extra to cover the tea time period. A domestic is employed five days a week and at night there is one carer awake and another who sleeps in. The manager works supernumerary to the rota and assisted with the people who used the service as and when required. We evidenced this during the site visit when the manager helped the staff during the lunch time. The staffing ratios were confirmed through the viewing of the staff duty rota and during discussions with staff. The manager told us that she was confident that staffing ratio was sufficient to attend to the assessed needs of the current 18 people who used the service.

Our judgement

Enough staff are employed to meet people's current health and welfare needs safely and consistently.

Overall, we found that the service 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

We spoke with people using the service who told us they were happy with the quality of service provided. We spoke with staff who told us that they were confident in the management of the home and that the standard of care was monitored. They also confirmed they felt that when concerns were raised, these were addressed and appropriate action taken.

Other evidence

The manager told us there was a system in place to ensure that they undertook regular checks on the quality of the services being provided. These included gathering information via questionnaires from the people who lived in the home (and people who supported them) to ensure they were happy with the service they received. Questionnaires were also sent out to visiting professionals for their opinion on the service provided. Information was then gathered and the manager then dealt with any areas highlighted as needing improvement. An example of this was when a relative asked if the home would introduce themed evenings when the people living there might enjoy other foods (Italian, Chinese or Indian food). This was tried and many people enjoyed it. This is now planned to be a regular event. We were told that people at the home had opportunities to have a say in the way the home was run, both formally and informally. They also had opportunities to influence their care and their personal accommodation. As an example we saw that rooms had been personalised to reflect people's interests. We saw the record of letters of appreciation and other comments made by visitors.

Regular meetings were held for people that lived at the home (and people who supported them) so that they could discuss any concerns they might have.

Care plans were reviewed monthly. Equipment was checked and serviced on a regular basis, in particular the fire alarm system and moving and handling equipment.

The provider visited the home at least once a month, spoke to people living there, their families, and the staff, and looked at all areas to check that good standards were in place. She writes about each visit in a report which she shares with the manager and any areas of concern are addressed.

Our judgement

People living at the home benefit from safe, good quality, care through the regular monitoring of the service.

Overall, we found that the service 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

Document purpose	Review of compliance report
Author	Care Quality Commission
Audience	The general public
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