

Review of compliance

Turning Point Pemdale	
Region:	East
Location address:	26A Nursery Close Potton Bedfordshire SG19 2QE
Type of service:	Care home service without nursing
Date of Publication:	August 2012
Overview of the service:	Pemdale is a care home registered to provide the regulated activity of 'Accommodation for persons who require nursing or personal care'. The home provides a service for five people who have a learning disability, and does not currently provide nursing care.

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

Our current overall judgement

Pemdale 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 to check whether Pemdale had taken action in relation to:

Outcome 10 - Safety and suitability of premises

Outcome 13 - Staffing

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 16 August 2012, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

During our inspection of Pemdale on 16 August 2012 we used a number of different methods to help us understand the experience of people using the service, because some of the people using the service had complex needs which meant that they were not able to tell us their experiences.

When we arrived, two people were getting ready to go out. They went in the home's minibus to a local woodland area where they had a good walk, arriving home in time for lunch. One person was very happily singing and dancing to Elvis music in the lounge, with staff joining in. Another person was attending their day service. The fifth person who lives at this home told us he had been pottering around in his greenhouse and watering the garden.

There was a happy, homely atmosphere, with staff and people who live at the home sharing laughter and having fun, clearly enjoying each other's company.

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

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

The provider was meeting this standard. The systems in place for ensuring people's safety in the event of fire were adequately tested and maintained.

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

The provider was meeting this standard. There were enough qualified, skilled and experienced staff to meet people's needs.

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 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 spoke with people during our inspection at Pemdale on 16 August 2012, but their feedback did not relate to this standard.

Other evidence

During our inspection on 15 May 2012, we judged that the provider was not meeting this standard as the systems in place for ensuring people's safety in the event of fire were not adequately tested and maintained. The provider sent us an action plan on 15 June 2012 in which they stated they had immediately ensured that tests were undertaken at the required intervals.

On 16 August 2012 we found that tests of the fire safety systems and procedures relating to fire safety had been undertaken as required. The fire risk assessment had been reviewed and updated.

Our judgement

The provider was meeting this standard. The systems in place for ensuring people's safety in the event of fire were adequately tested and maintained.

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

We spoke with people during our inspection at Pemdale on 16 August 2012, but their feedback did not relate directly to this standard.

Other evidence

During our inspection on 15 May 2012 we judged that there were not enough staff to meet people's needs. This was because there had been a number of occasions when there were only two staff to support the five people living at Pemdale. The records showed that people's needs for social activity and interaction, and support to access the community, had not always been met.

The provider sent us an action plan in which they stated they had immediately ensured that there would always be at least three staff on duty. Also that staffing hours would be used more flexibly to allow for activities outside the home to take place.

On 16 August 2012 we looked at staff rotas which confirmed that there had been a minimum of three staff on duty at all times. A number of the home's own 'bank' (relief) staff had been employed, and agency staff had been used to fill in the gaps. The manager ensured that agency staff had almost always worked at Pemdale on previous occasions so that they were not strangers to the people living there. The manager said the agency staff who worked at Pemdale "are excellent". The staff rotas had improved and were clear and legible, correcting fluid had not been used and we were able to see which staff had worked and when.

Since our previous inspection the staff had started to keep an activity diary for each person. These showed that more activity had taken place, but staff told us they were not yet very good at writing down everything that went on. The manager and the staff on duty assured us that each person living at Pemdale was doing what they wanted to do and as much as they could cope with, based on their abilities, age, health and so on.

The manager told us that since our previous visit, one person's care plan had been updated to show more clearly that their needs had changed due to a deterioration in their physical health.

Our judgement

The provider was meeting this standard. There were enough qualified, skilled and experienced staff to meet people's needs.

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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