

# Review of compliance

Autism North Limited Trinity House	
<b>Region:</b>	North East
<b>Location address:</b>	Knaresborough Road Murton Seaham Co Durham SR7 9RQ
<b>Type of service:</b>	Care home service without nursing
<b>Date of Publication:</b>	October 2011
<b>Overview of the service:</b>	Trinity House is registered to provide care (but not nursing care) for seven adults over 18 with learning disabilities. It is a service specially for people with autism and was first registered in April 2007. Trinity House is a large detached building with a big garden. It provides plenty of space for residents with two large living rooms and a dining room. All the bedrooms are single and each has

	its own bathroom with a bath or shower.
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# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**Trinity House was meeting all the essential standards of quality and safety but, to maintain this, we have suggested that some improvements are made.**

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 4 March 2011, talked to staff and talked to people who use services.

### What people told us

People who used the service told us that staff were good, supported them well and that they liked living in the home.

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

### What we found about the standards we reviewed and how well Trinity 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**

During the visit we saw that staff were respectful and made sure that people were offered a choice about their care and daily activities.

#### **Outcome 02: Before people are given any examination, care, treatment or support, they should be asked if they agree to it**

We saw from the care records and through talking to people, that where they were able people received the care, treatment and support they agreed to.

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

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

**Outcome 05: Food and drink should meet people's individual dietary needs**

People were supported to have adequate nutrition and hydration.

**Outcome 06: People should get safe and coordinated care when they move between different services**

The provider cooperated with others involved in the care and support of people who used the service.

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

The service made sure that staff were trained and people were protected from the risk of abuse.

**Outcome 08: People should be cared for in a clean environment and protected from the risk of infection**

People lived in a clean and safe environment.

**Outcome 09: People should be given the medicines they need when they need them, and in a safe way**

The home made sure the medicines given were appropriate and that medicines were reviewed and changed as peoples' needs or condition changed.

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

People lived in safe accessible surroundings that promoted their wellbeing.

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

The home made sure that equipment was properly maintained and met the assessed needs of the people who lived there.

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

There were suitable recruitment policies and procedures in place to protect people from harm.

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

People who used the service benefitted from sufficient staff to meet their needs.

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

People were safe and their health and welfare needs were met by competent staff.

**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 home had appropriate systems in place for gathering, recording and evaluating accurate information about the quality and safety of the care, treatment and support the service provided.

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

People who used the service could be sure that their comments were listened to and acted on effectively. However the procedure did not give clear guidance about who could investigate their complaint if they were unhappy with the initial response or if they felt they could not approach the provider.

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

Personal records were accurate, fit for purpose, held securely and remain confidential.

**Actions we have asked the service to take**

We have asked the provider to send us a report within 28 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.

Where we have concerns we have a range of enforcement powers we can use to protect the safety and welfare of people who use this service. Any regulatory decision that CQC takes is open to challenge by a registered person through a variety of internal and external appeal processes. We will publish a further report on any action we have taken.

**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

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

There was evidence in the communal areas and in bedrooms about meetings and events that involved the people who lived in the home. People were encouraged to join in local events. Recent visits had taken place to pubs, swimming pools, discos and bowling alleys. All of the people go on holiday at least once a year. One person was going on holiday a few days after our visit. He told us that he had been supported by staff, but had chosen and booked the holiday himself.

##### Our judgement

During the visit we saw that staff were respectful and made sure that people were offered a choice about their care and daily activities.

## Outcome 02: 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 02: Consent to care and treatment

#### Our findings

##### What people who use the service experienced and told us

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

The manager told us that systems were in place to gain and review how people gave consent to care and treatment. Should people lack capacity meetings would be held with other professionals in line with the Mental Capacity Act 2005.

The provider undertook staff training, regular audits and internal inspections.

Care plans examined showed there were meetings and care reviews with other professionals to make sure this happened. Information in the care plans examined showed that reviews were held on a regular basis and relatives and other professionals were involved in the process. One person spoken with confirmed that he had been involved in his care reviews.

##### Our judgement

We saw from the care records and through talking to people, that where they were able people received the care, treatment and support they agreed to.

## 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

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

We walked around the home and found people interacting with staff on a one to one basis. Staff were seen to interact appropriately with people and assistance was given in a sensitive manner.

The provider told us on the Provider Compliance Assessment that in care records there was a risk assessment which provided information which was used as a basis for each individual care plan.

We looked at a sample of care plans. These were person centred and comprehensive. They detailed how to meet people's health needs and also included person's wants and aspirations for the future. The plans had been reviewed, with evidence to confirm that advocacy services had been consulted where appropriate.

##### Our judgement

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

## Outcome 05: 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 05: Meeting nutritional needs

#### Our findings

##### What people who use the service experienced and told us

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

The provider told us that meals are prepared on an individual basis and staff spoken with confirmed this to be the case. People were offered a choice. In the care plans we looked at an assessment tool had been used to find out if people were at risk of malnutrition.

People had access to hot and cold drinks, snacks and fresh fruit during the day and overnight. Staff were knowledgeable about individual needs and gave assistance in a discreet and sensitive manner.

##### Our judgement

People were supported to have adequate nutrition and hydration.

## Outcome 06: 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 06: Cooperating with other providers

#### Our findings

##### What people who use the service experienced and told us

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

During our visit we examined a sample of care records. The records showed involvement of health and social care professionals such as speech and language therapists, physiotherapists, occupational therapists, district nursing services and consultants. We also saw that care managers and relatives took part in individual care reviews. The records showed that care plans were discussed and relatives were asked about their level of satisfaction with the service.

##### Our judgement

The provider cooperated with others involved in the care and support of people who used the service.

## 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

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

The manager told us that there were detailed safeguarding policies and procedures within the home. The protocols followed Durham County Council procedural framework and information was available for staff to follow should there be any concerns.

Information we had received from the home over a six months period confirmed that staff referred issues appropriately when a concern was raised. All of the staff spoken with confirmed that they had been trained in safeguarding and would know what to do if a suspicion of abuse was raised.

##### Our judgement

The service made sure that staff were trained and people were protected from the risk of abuse.

## Outcome 08: 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

The provider is compliant with Outcome 08: Cleanliness and infection control

#### Our findings

##### What people who use the service experienced and told us

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

We saw from the records that staff had received training in infection control and staff confirmed this to be the case.

There were suitable systems in place to make sure that the home was kept clean and free from odours. Protective aprons and gloves were available for staff to use to prevent cross infection.

##### Our judgement

People lived in a clean and safe environment.

## Outcome 09: 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 09: Management of medicines

#### Our findings

##### What people who use the service experienced and told us

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

The manager told us that all staff who gave medication had been trained to do so. She also told us that a sample medication audit was carried out monthly by a senior person within the company.

There were no medication errors reported.

##### Our judgement

The home made sure the medicines given were appropriate and that medicines were reviewed and changed as peoples' needs or condition changed.

## 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

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

When we visited the home we saw that it was being suitably maintained and furnished. All of the communal areas were domestic in style. The bedrooms were large and there was evidence that they were furnished to individual preference. People had been encouraged to bring their personal items with them.

Safety checks were carried out in line with the homes policies.

##### Our judgement

People lived in safe accessible surroundings that promoted their wellbeing.

## 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

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

The manager told us that they carried out internal inspections and produced action plans to ensure all equipment was properly maintained and suitable to use. Contracts were in place for servicing of equipment. Where specialist equipment was in use, there was evidence to confirm that people had been assessed by occupational therapists. This was to make sure it was safe to use and that staff were trained.

##### Our judgement

The home made sure that equipment was properly maintained and met the assessed needs of the people who lived there.

## 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

The provider is compliant with Outcome 12: Requirements relating to workers

#### Our findings

##### What people who use the service experienced and told us

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

The manager told us that they followed a comprehensive, robust recruitment policy and procedure. All staff had an enhanced Criminal Record Bureau Check, undertake induction and appropriate training in accordance with their role. The provider also told us that skills are continually reviewed during supervision and training was put in place to meet the changing needs of the people who lived in the home.

##### Our judgement

There were suitable recruitment policies and procedures in place to protect people from harm.

## 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

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

The manager told us that risk assessments were produced and considered in order to maintain sufficient staffing levels to meet the needs and wishes of the people who lived in the home, and to maintain safety. The provider also told us that staffing levels were monitored and reviewed by an operations manager during the monthly provider visit to assess and monitor the quality of service provision. We saw that people were being looked after on a one to one basis.

There was no indication to suggest that staffing levels had not been appropriate.

##### Our judgement

People who used the service benefitted from sufficient staff to meet their needs.

## 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

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

We talked to a number of staff, all felt that morale was good, they were well supported and that they had regular supervision. They told us that staff meetings had taken place and they had the opportunity to input any issues or concerns.

The provider told us that when staff have supervision, training needs were reviewed and any training that was relevant was provided and encouraged. Staff told us that all of their mandatory training was up to date.

##### Our judgement

People were safe and their health and welfare needs were met by competent staff.

## 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

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

The manager told us that they complete audits and internal inspections in all areas.

This included care plans, medications, infection control, health and safety, complaints, staff training and recruitment.

Staff meetings took place on a regular basis and relatives were consulted regularly by means of a survey.

The care plans examined showed that risk assessments were undertaken and that risk management plans were in place to address individual needs.

##### Our judgement

The home had appropriate systems in place for gathering, recording and evaluating accurate information about the quality and safety of the care, treatment and support the service provided.

## 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

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

The manager told us that details of complaints were dealt with in line with policies and procedures, and that a number had been received and acted upon accordingly. The manager also said that regular contact was kept by key workers with families and issues were raised in six monthly reviews.

We saw a copy of the complaints procedure in each persons care records. This gave the person information of how to complain, but implied that the person could contact the Care Quality Commission if they were not satisfied with the response from the provider or felt unable to approach the provider. This needed to be revised so that people understood that CQC are interested in any information a person wishes to share with them, but cannot investigate individual complaints.

##### Our judgement

People who used the service could be sure that their comments were listened to and acted on effectively. However the procedure did not give clear guidance about who could investigate their complaint if they were unhappy with the initial response or if they felt they could not approach the provider.

## 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

One person said, "The staff here are good, they help me when I need it , but let me make my own decisions as far as I am able".

Another person said, "I like living here, we go to the theatre and football matches".

##### Other evidence

We looked at a sample of care plans These were person centred and comprehensive.

They included how to meet people's health needs and also included person's wants and aspirations for the future. The plans had been reviewed, with evidence to confirm that advocacy services had been consulted where appropriate.

We saw that all care records were being stored securely and in line with the Data Protection Act 1998

##### Our judgement

Personal records were accurate, fit for purpose, held securely and remain confidential.

## 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	Regulation 19 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 17: Complaints
	<b>Why we have concerns:</b> The complaints procedure did not give clear guidance about who could investigate their complaint if they were unhappy with the initial response or if they felt they could not approach the provider.	
Treatment of disease, disorder or injury	Regulation 19 HSCA 2008 (Regulated Activities) Regulations 2010	Outcome 17: Complaints
	<b>Why we have concerns:</b> The complaints procedure did not give clear guidance about who could investigate their complaint if they were unhappy with the initial response or if they felt they could not approach the provider.	

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 28 days of this report being received.

CQC should be informed in writing when these improvement 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 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

<b>Document purpose</b>	Review of compliance report
<b>Author</b>	Care Quality Commission
<b>Audience</b>	The general public
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