

Barchester Healthcare Homes Limited

Peony Court

Inspection report

58 Addiscombe Road
Croydon
Surrey
CR0 5PH

Tel: 02086498800
Website: www.barchester.com

Date of inspection visit:
26 July 2023

Date of publication:
21 August 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Peony Court is a residential care home providing personal care to up to 34 people. The service specialises in providing support to older people. At the time of our inspection there were 27 people using the service.

People's experience of using this service and what we found

People were safe at the service. Staff understood how to safeguard people from abuse and knew when and how to report safeguarding concerns to the relevant agencies. Staff understood how to manage identified risks to people's safety, to help keep them safe.

There were enough suitably skilled and experienced staff to support people and meet their needs. Staff were available to support people when their assistance was needed. Recruitment and criminal records checks were undertaken on staff to make sure they were suitable to support people.

Health and safety checks were carried out of the premises and equipment to make sure they were safe. The service was clean and hygienic. Staff followed current infection control and hygiene practice, to reduce the risk of infection. Medicines were managed safely and people took their medicines as prescribed.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People were happy with the care and support they received from the service. They told us staff treated them well and they were kind and caring. Staff enjoyed working at the service. They were well supported and encouraged to put people's needs and wishes at the heart of everything they did.

People's relatives and friends were able to visit without any unnecessary restrictions and were warmly welcomed at the service.

The service was managed well. The registered manager was suitably experienced and understood how people's needs should be met. They had good oversight of the service and undertook audits and checks to monitor and review the safety and quality of the service. The provider undertook their own checks of the service to make sure the service was providing safe, high quality care to people. People's views were sought about how the service could improve and the service acted on these.

There were arrangements in place to make sure accidents, incidents and complaints were fully investigated, with people involved and informed of the outcome. Lessons learnt were shared with staff to help them improve the safety and quality of care and support provided.

Proactive working relationships had been developed with healthcare professionals involved in people's

care. The service acted on their recommendations to deliver care and support that met people's needs.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was good (published 15 August 2018). The service at that time was known as Thackeray House. The provider closed Thackeray House in February 2020 to refurbish the service. They reopened the service in September 2021 as Peony Court. Although the name of the service has changed, the provider retained their previous regulatory history at this location.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained good, based on the findings of this inspection.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Peony Court

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried out by 1 inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Peony Court is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Peony Court is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 6 people using the service and 5 relatives. We asked them for their feedback about the service. We observed interactions between people and staff to understand people's experiences. We also spoke with the registered manager, the deputy manager, 3 care support workers, the activities coordinator, the head of maintenance and the chef. We reviewed a range of records. This included 3 people's care records, medicines stock and administration records, 3 staff recruitment files and other records relating to the management of the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection, the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safe at the service. One person told us, "Yes, I do feel safe. There is always someone about who can help you." Another person said, "Perfectly safe. I have complete trust." A relative told us, "I have such faith in the home and the staff. When I leave here, my mind is at rest and I can sleep at night knowing [family member] is safe."
- Staff had been trained to safeguard people from abuse. Staff understood the signs to look for that might indicate abuse and how and when to report concerns to the relevant agencies.
- The registered manager understood their responsibility to liaise with the local authority and other relevant agencies if a safeguarding concern about a person was reported to them. When a concern had been raised, the registered manager took appropriate action to make sure people were safe from further risk of abuse.

Assessing risk, safety monitoring and management

- Risks to people's safety were managed well. A relative told us, "It is such a relief that [family member] is here because I totally trust the staff. I can sleep at night. [Family member] is arthritic and not safely mobile and will attempt to walk unsupported but they [staff] have taken precautions; pressure mat and so on."
- The service had assessed risks to people's safety and there were plans in place for staff to follow, to manage these risks, and keep people safe.
- Staff understood risks to people and the action they should take to support people to stay safe. Staff told us they made sure the environment was clear of slip and trip hazards and equipment used by people to help them move safely, was always to hand.
- Staff undertook regular health and safety checks of the premises. Safety systems and equipment used at the service were maintained and serviced at regular intervals to make sure these remained in good order and safe for use.
- Staff had been trained to deal with emergency situations and events if these should arise so that they would know what action to take, to keep people safe, in these circumstances.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

- We found the service was working within the principles of the MCA.

Staffing and recruitment

- There were enough suitably skilled and experienced staff to support people. A relative told us, "They do seem to have plenty of staff and we are encouraged to drop in any time so we come at all different times. I know less about nights but according to [family member] they never have to wait long for anything."
- We saw people did not have to wait long for assistance and call bells were answered promptly. One person told us, "You never have to wait long for the bell to be answered."
- The registered manager reviewed staffing levels at regular intervals to make sure there were enough staff to meet people's needs at all times.
- The service operated safe recruitment practices. Checks were undertaken on staff who applied to work at the service to make sure only those suitable were employed to support people. This included checks with the Disclosure and Barring Service (DBS) who provide information including details about convictions and cautions held on the Police National Computer. This information helps employers make safer recruitment decisions.

Using medicines safely

- People received their medicines safely and as prescribed.
- People's records contained current information about their medicines and how they should be supported to take these.
- Our checks of medicines stocks, balances and records showed people consistently received the medicines prescribed to them.
- Medicines were stored in a safe and appropriate way.
- The service audited medicines stock and records to check staff were managing and administering medicines safely. When issues were identified with staff's practice, action was taken to provide the appropriate support to staff to reduce the risk of these issues reoccurring.
- Staff were required to refresh their training in medicines administration at regular intervals to make sure their skills and knowledge remained up to date.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- Staff followed correct procedures for preparing and storing food.

Visiting in care homes

- Visiting arrangements at this service were in line with government guidance. There were no unnecessary restrictions on friends and relatives visiting people at the service.

Learning lessons when things go wrong

- The service managed accidents and incidents at the service well. There were systems in place for staff to report and record accidents and incidents.
- The registered manager investigated accidents and incidents and took the necessary action to reduce the risk of these reoccurring. They also reviewed accidents and incidents at the service on a monthly basis to check for any trends or themes.
- Lessons learnt from accidents and incidents were shared with staff to help them improve the quality and safety of the support they provided.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question good. At this inspection, the rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager worked hard to instil a culture of care in which staff valued and promoted people's individuality, protected their rights and enabled them to develop and flourish.
- The registered manager encouraged and supported staff to put people's needs and wishes at the heart of everything they did. One person told us, "The staff are the jewel in the crown. Endlessly kind and patient. They genuinely care." Another person said, "They are the absolute best thing about the home. They are wonderful, gentle and fun, and very caring."
- Staff spoke enthusiastically about their roles and the support they provided to people. One staff member told us, "It's fun here...I have built a good bond with people and I try and help people have a happy life." Another staff member said, "The residents are why I come in every day. They are very individual and I have time to sit with them and talk with them and they ask about me and my background."
- The registered manager had an 'open door' policy and was available and accessible to people, visitors and staff. They took a genuine interest in what they had to say. We saw people and visitors were warmly greeted by the registered manager and the staff team, and there was genuine kindness and respect in their interactions.
- Staff were rewarded for demonstrating excellence in their roles through the employee recognition scheme. A staff member who had been rewarded through this scheme told us, "I felt good because people recognised my work. I liked that it meant people were happy with me."
- Staff felt respected and supported by the management team which supported a positive and improvement-driven culture. They told us they felt able to raise concerns with the management team and these would be listened to and acted on.
- People's feedback and views were sought by the service. This was used to plan how the service could be improved for them. One person told us, "Our opinions are asked and notice taken. Quite a few activities are our suggestion." A relative said, "They do have meetings and they listen to what is said. The activities have changed. Much more fun now."
- Staff were provided opportunities through supervision and staff meetings to give their feedback about how the service could be improved. A staff member told us, "We have team meetings and we can give ideas or concerns. The managers act on this and listen."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; continuous learning and improving care

- The service was managed well. One person told us, "I can only judge by results and everything runs along smoothly, with great staff." Another person said, "All runs like clockwork." A relative told us, "I really can't say enough about how good [registered manager] and the team are. It's amazing. The activities, the personal touches and the family feeling."
- The registered manager had the skills, knowledge, and experience to perform their role and a clear understanding of people's needs. They understood and demonstrated compliance with regulatory requirements and best practice guidance.
- The registered manager had good oversight of the service and undertook audits and checks at regular intervals to make sure people were safe and receiving high quality care and support. Issues identified through checks were acted on and used to support staff to improve their working practices.
- The provider undertook their own checks and reviews of the service at regular intervals to make sure the service was meeting required standards.
- Staff had clearly defined roles, responsibilities, and duties and told us, on the whole, they worked well together. One staff member said, "My colleagues are lovely and we have a strong team and we support each other."
- People's feedback confirmed they were happy with the care and support provided. They told us they were treated well by staff, who were kind and caring. One person told us, "They are a jolly bunch and I have developed good relationships with them. They are so kind." A relative said, "They can't do enough. There is nothing [family member] can't have. The service is excellent."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; working in partnership with others

- The service had systems in place to investigate accidents, incidents, and complaints and to make sure people would be involved and informed of the outcome.
- The registered manager understood their responsibility to provide honest information and suitable support and to apply duty of candour where appropriate.
- The service worked in partnership with a range of healthcare professionals involved in people's care and support. They acted on their recommendations and advice to plan and deliver care and support that met people's needs and help them achieve positive outcomes.