

Peacehaven House

Peacehaven

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Outstanding ☆

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Peacehaven is a residential care home providing personal and nursing care to people aged 65 and over. At the time of the inspection 53 people were living at the home.

Peacehaven accommodates 54 people in one adapted building.

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

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.

Activities were organised around the wishes and aspirations of people living at Peacehaven. All staff worked outstandingly well together to gather the views of people they supported. Activities took place each day. Volunteers worked with staff to enable as many people as possible to join in outings and trips.

The service was highly effective at promoting people's independence. The service used technology to make sure that people lived with as few restrictions as possible. People had been offered 'lifeline' pendants to be able to request staff assistance in an emergency, when they were not in close contact with a call bell device.

People had end of life care plans in place, which helped to provide information to staff about how they wanted to be cared for. The home provided facilities to enable relatives to stay overnight with their family member. Family members were highly complementary about the care their relatives received.

Staff knew how to keep people safe from harm. Staff were recruited safely, and sufficient numbers were employed to ensure people's care and social needs were met.

People's preferred method of communication was recorded. Staff had created mood boards, emotion cards, yes and no cards, and printed sentences for pointing to help people who had difficulty communicating verbally.

People were supported to eat a varied and nutritious diet based on their individual preferences. People were involved in making changes to the menu.

The leadership of the service promoted a positive culture that was person-centred and inclusive. We received positive feedback about the quality of care and support people received and the overall management of the service from people and their relatives. The registered manager and the staff team showed a desire to improve on the service provided and in turn the quality of life experiences for the people living at Peacehaven.

Staff were committed to delivering care in a person-centred way based on people's preferences and wishes. There was a stable staff team who were knowledgeable about the people living at the service and had built trusting and meaningful relationships with them.

Staff treated people with kindness and compassion. There was a very caring and friendly atmosphere in the home between staff and people using the service. People described staff as "caring and respectful".

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

Rating at last inspection

The last rating for this service was Good (published 3 February 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Peacehaven

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 Care Act 2014.

Inspection team

The inspection team consisted of an 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.

Peacehaven is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before inspection

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

During the inspection

We spoke with nine people who used the service and four visitors about their experience of the care provided. We spoke with five members of staff including the registered manager, senior care workers, and

the activity coordinator.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at a variety of records relating to the management of the service, including training, supervision, staffing information and a number of quality audits.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff continued to receive safeguarding training and had access to relevant information and guidance about how to protect people from harm.
- People told us they felt safe living at Peacehaven; comments included, "There is none of that abuse here. I feel safe with the staff about and my buzzer round my neck", "I feel safe here because my family live away and I was worried about being alone and falling, which was happening at home".
- Visitors were happy that their family member was in a safe environment. Their comments included, "I feel my relative is absolutely 100% safe, I would not leave them here otherwise" and "I feel my relative is safe here, they were falling and getting depressed. They have changed so much in the short time of being here".

Assessing risk, safety monitoring and management

- Individual risks to people were assessed; risk assessments provided detailed information around people's individual risks and included guidance for staff to keep them safe.
- People at Peacehaven were encouraged to be remain as mobile as possible around the home. Since the last inspection the provider had supplied 'Lifeline' pendants for people to wear, to be able to attract staff attention at any time, in any part of the home, if they fell.
- The environment was well maintained. Equipment and utilities were regularly checked to ensure they were safe to use. People had individual emergency evacuation plans in place.

Staffing and recruitment

- Staff continued to be recruited safely.
- There were sufficient numbers of staff employed and on duty to meet people's assessed needs.
- People and visitors said there were enough staff. Comments included, "There is always enough staff about; when I use my call bell they always come quickly", "There are more than enough staff and very reliable. I only have to buzz and they come with a cup of tea", "Yes, there are always plenty of staff about at all times. If my relative requests any assistance they are dealt with quickly" and "When I visit there are plenty of staff about but my relative doesn't need much assistance".

Using medicines safely

- People continued to receive their medicines safely and on time. Staff received training in medicines management and had regular competency checks to ensure ongoing safe practice.
- There were suitable arrangements for ordering, receiving, storing and disposal of medicines.
- The registered manager completed monthly audits of medicines to ensure policies and procedures were followed and any errors or concerns were identified.

Preventing and controlling infection

- Arrangements were in place for making sure that premises were kept clean and hygienic so that people were protected from infections.
- Staff used personal protective equipment (PPE) such as disposable aprons and gloves.
- We found the home to be clean and tidy throughout.
- People told us their rooms were cleaned every day.

Learning lessons when things go wrong

- Staff knew how to report accidents and incidents.
- Accidents and incidents were recorded and analysed, so any trends or patterns could be highlighted.
- Action was taken to minimise risk, such as checking people's footwear was suitable and ensuring their walking frames were safe to use.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's individual needs were assessed before they moved into Peacehaven; this helped to ensure their needs were understood and could be met.
- Assessments of people's care and support needs were completed in detail and provided guidance for staff to support people based on their needs and choices.
- Staff knew people well and how to best meet their needs.

Staff support: induction, training, skills and experience

- Staff continued to receive a good range of support including regular training. Training records showed staff training was kept up-to-date.
- Staff received regular supervision and appraisal to support their developmental needs.
- Staff told us they felt supported by the registered manager and their colleagues.
- Most of the staff, including managers, had worked at the home for many years which provided a consistent staff team.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to eat a varied and nutritious diet based on their individual preferences.
- Staff assessed people's nutritional needs and any risks related to their eating and drinking. People's weight was monitored.
- People were involved in making changes to the menu based on their own preferences.
- People told us the food was very good; comments included, "The food is fine, and we get plenty of choice and plenty of it. I can always say if I don't like something and the chef would give me something else", "The food is grand, plenty of it and I have put weight on because I wasn't eating at home" and "Food is very good and excellent choices. Could do with some lighter options".

Supporting people to live healthier lives, access healthcare services and support; staff working with other agencies to provide consistent, effective, timely care

- Staff had good relationships with health and social care professionals who had contact with the service.
- People were supported to see their GP, district nurses and were referred to other healthcare professionals, such as, Optician, Speech and Language team and Dietician in a timely way, when required.
- Staff promoted good oral health care in line with recent guidance.

Adapting service, design, decoration to meet people's needs

- The premises were suitable for people's needs and provided people with choices about where they could spend their time.
- People had access to a large enclosed garden; a level circular path encouraged people to exercise and mobilise safely and enjoy the garden.
- People's bedrooms were personalised with items they had bought and pictures.
- There were adaptations to shared bathrooms and toilets for people with disabilities to make them easier to use. Signage on the doors identified these facilities, to enable people to find them without assistance.

Ensuring consent to care and treatment in line with law and guidance

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 Act 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 MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager had a clear understanding of the MCA and knew what actions to take to ensure that people's rights were upheld under the Act.
- Applications for DoLS authorisations had been made when needed.
- Mental capacity assessments had been completed to identify when a person had capacity to make a specific decision.
- People had given their consent to care.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- Staff treated people with kindness and compassion. There was a stable staff team who knew people well and what mattered to them. Positive and caring relationships had been developed between people and staff.
- There was a very caring and friendly atmosphere in the home between staff and people using the service. People described staff as "caring and respectful".
- Staff clearly knew people very well and were able to tell us about individuals and their lives and families. This enabled them to engage well with people, and we observed them chatting, which increased people's sense of well-being.
- People and visitors spoke positively about staff; comments included, "The staff are like my friends, they are so kind to me", "The staff are patient and kind and you can have a good laugh with them", "The staff are brilliant; you cannot knock them. They are all approachable and so open" and "The staff are lovely and really nice. Very patient when dealing with people".

Supporting people to express their views and be involved in making decisions about their care

- People and their family members were encouraged to share their views about the care provided.
- People told us they were able to choose how and where they spent their day. Our observations evidenced this.
- The activity coordinator spent time with people individually or in small groups to gather their views and wishes. Information was passed onto the registered manager. Changes to menus and activities had been made as a result of this.
- Some people chose to join in the activities provided; others spent time in the garden with family members or friends. Several people enjoyed time in the bedrooms, reading or watching television.
- People's care planning documents gave the opportunity to record specific needs and wishes in relation to their chosen lifestyle.

Respecting and promoting people's privacy, dignity and independence

- Staff provided support in private to maintain people's privacy and dignity. One person said, "They are always respectful and knock before they enter my room."
- People told us that staff always asked if it was ok prior to commencing care and support.
- People were encouraged to be as independent as possible.
- Staff respected people's right to confidentiality. Visitors said that they had never heard staff discussing any

other resident in front of them or anyone else. One person said, "If I have ever been told anything about my relative, I have always been taken to one side."

- People's personal information was stored securely at the office.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Good. At this inspection this key question has now improved to Outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- There was an exceptionally strong and visible person-centred culture with staff going out of their way to ensure that people were respected as individuals.
- Staff wanted to ensure that people from the lesbian, gay, bisexual, and transgender (LGBT) community felt welcome at the home. They had sourced information and attended training sessions with Silver Rainbows, a social network for older lesbian, gay, bisexual and trans people in Cheshire.
- The service was highly effective at promoting people's independence. The service used technology to make sure that people lived with as few restrictions as possible. People had been offered 'lifeline' pendants to be able to summon attention or staff assistance in an emergency, when they were not in close contact with a call bell device.
- People told us wearing the pendants had had a positive effect on their lives. One person said, "Wearing the pendant means I can go out; I wouldn't go out without it on. Another person said, "I am 'safe as houses' now when I wear it. I have such peace of mind that if I fell, particularly in the garden, staff would find me quickly."
- Some people had been admitted to Peacehaven from living in another country or living hundreds of miles away. The registered manager used technology and spoke with the person, family members and current care givers using Skype. This enabled a comprehensive assessment to be completed prior to admission to ensure people's needs could be met. The prospective 'residents' were able to see the manager and other staff members as well as seeing parts of the home, prior to their admission.
- A person living at the home was able to keep in touch with a close family member who lived overseas using Skype and could see them on an iPad.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Activities were organised around the wishes and aspirations of people living at Peacehaven. All staff worked outstandingly well together to gather the views of people they supported. The 'Platinum Rule' was how people's wishes and aspirations were gathered and fulfilled.
- Wishes and aspirations were written on a label and attached to a tree, drawn and displayed in the hallway. This meant it was visible for everyone to see and be inspired by other people's wishes and to add one of their own.
- People had been able to experience trips to local football matches, meals to favourite restaurants, local places of interest and to go shopping; places they had not been to for a long time. A person told me, "We went to a local Chinese restaurant; it was absolutely lovely as I hadn't been in one for such a long time."

Another person said, "We are making new memories of places we haven't been to for a long time."

- Activities took place each day; two dedicated staff worked over seven days, including evenings, when particular activities took place. Volunteers worked at Peacehaven to enable as many people as possible to join in outings and trips. These included, young people taking part in their Duke of Edinburgh award and those wanting work experience.
- Peacehaven had acquired the use of a minibus and was able to arrange trips to local amenities; these included, garden centres, tea shops and a farm. Staff took small groups of people out in taxis for lunch or afternoon tea.
- The service played a key role in the local community and was actively involved in building further links. Community resources used the home for weekly meetings and met with people and provided their services to them when required. Links had been made with a local nursery and primary school, who were to visit regularly.

End of life care and support.

- Where it was necessary, people had end of life care plans in place, which helped to provide information to staff about how they wanted to be cared for. Care plans took account of people's religious wishes.
- The service was accredited with the 'Six Steps to Success in End of Life Care', which recognises excellent end of life care.
- One person was on the 'Golden Standard Framework which detailed the care they were receiving.
- Staff demonstrated outstanding kindness in arranging a significant experience, which had an extremely positive impact on the person in the latter stages of their life.
- The home provided facilities to enable relatives to stay overnight with their family member.
- Relatives spoke very highly of the care their family member received at the end of their life. Comments included, "Words cannot express our gratitude to you all for how amazing you have been over the last three years for [name] in his last days. All he spoke about was how loved he felt by you all. Your support to the family has been exceptional" and "Over [name] last few months it was comforting to the family to see how comfortable [name] was and how their face lit up when her favourite carers were looking after her. We will be forever grateful for letting her stay with you to spend her last few months of her life with people [name] knew and care for".

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Care records clearly recorded people's preferred method of communication and any impairments to their hearing or eye sight that could affect effective communication with others.
- Staff had created mood boards, emotion cards, yes and no cards, and printed sentences for pointing to help people who had difficulty communication verbally.

Improving care quality in response to complaints or concerns

- There was a complaints policy in place which outlined how complaints would be responded to.
- People told us they knew how to make a complaint.
- No complaints had been made since the last inspection. Feedback we received was extremely positive.

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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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; 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

- The registered manager and staff promoted a culture of person-centred care by having a clear vision and values, engaging with everyone using the service and family members and supporting people to live fulfilled lives.
- Policies and procedures provided guidance around the duty of candour responsibility if something was to go wrong.
- People, staff and relatives gave very positive feedback about the registered manager.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The service continued to be well led by a registered manager; they were supported by a deputy manager and senior staff who had all worked at the service for many years. They understood their role and what was required to ensure the service provided good care to people.
- The registered manager was very involved in the day to day running of the service including working hands on, alongside staff where required.
- Staff felt respected, valued and supported and said they were fairly treated. There was a positive attitude in the staff team with the aim of trying to provide the best care possible for the people living at the service.
- There was good communication between the management team and care staff. Important information about changes in people's care needs was communicated at staff handover meetings each day and regular staff meetings.
- The registered manager was clear about their responsibilities for reporting to the CQC and the regulatory requirements. Risks were clearly identified and escalated where necessary.
- A training program was in place to help staff with aspirations to be future team leaders and managers to be identified and developed for the future.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People living at the service met with staff regularly to discuss their care; this included any activities they wanted to do and different meals they wanted to try. Staff used photographs and other communication aids with those who required them. Staff ensured people who needed them wore spectacles and hearing aids.
- Formal feedback in the form of questionnaires was sought from people living at Peacehaven, relatives and

staff each year. Results and comments were analysed; we saw action had already been taken by the registered manager to implement changes.

Continuous learning and improving care

- Quality assurance systems were in place and continued to be used effectively to monitor key aspects of the service. Audits and checks were completed on a regular basis by the management team and registered provider to identify areas of improvement.
- Staff meetings and daily handover meetings were opportunities to discuss any incidents or ways to improve the care people received.

Working in partnership with others

- The registered manager had developed good links for the benefit of the service with key organisations, reflecting the needs and preferences of people in its care, to improve the quality and safety of care people received.
- The registered manager kept up to date with developments in practice by working with other registered managers and attending at the local registered manager's forum.