

## Penny Meadow Life Skills Limited

# Penny Meadow

### 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?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

What life is like for people using this service:

The service had a small team of staff who were skilled and competent in meeting people's individual needs. Staff and the registered manager showed a genuine motivation and passion to deliver personalised care based on people's preferences and likes.

Support was planned and delivered in a structured way to ensure people's safety and welfare and to meet their emotional needs. Staff had access to up to date information about how to support people effectively.

People were encouraged to develop daily living skills and to be as independent as possible. They had the option to participate in a range of activities which met their individual choices and preferences. This enabled people to achieve positive outcomes and promoted a good quality of life.

The registered manager had been in post for many years and knew the people receiving the service and their staff team very well, however improvements were required to ensure that information regarding recruitment was recorded.

More information is in the detailed findings below.

Rating at last inspection:

Good (report published 7 June 2016)

About the service:

Penny Meadow is a respite service which provides short-term overnight accommodation and personal care for up to two people who have a learning disability or autistic spectrum disorder. It operates between the hours of 4pm and 10am the following day. The service had been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live lie as any citizen 'Registering the Right Support' CQC policy.

Why we inspected:

This was a planned inspection based on the rating at the last inspection. The overall rating is Good.

Follow up:

We will continue to monitor the service through the information we receive.

## 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?

Good ●

The service was 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.

# Penny Meadow

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

One inspector carried out this inspection.

Service and service type:

Penny Meadow is a care home which provides respite care. People in care homes receive accommodation and nursing or personal care. CQC regulate both the premises and the care provided and we looked at both during this inspection. A day service provision managed by the same provider ran alongside the respite service. The inspection did not look at the day service however, people using the respite service accessed activities organised by the day service and this is referred to within this report.

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

We telephoned the service during the day of inspection to check that there were people receiving respite care that evening.

What we did:

We reviewed information we had received about the service since the last inspection in March 2016. We assessed the information that providers are required to send us annually. This gives us key information about the service, what the service does well and improvements they plan to make. We used all this information and the previous inspection report to plan our inspection.

People receiving respite care at the time of inspection were not fully able to share with us their experiences of the service. We did speak to one person and spent time observing how staff interacted with this person.

We also spoke with one support worker and the registered manager.

We reviewed a range of records including two people's care plans and one person's medication record. We looked at one staff member's recruitment record and two more recruitment records which the registered manager sent us after the inspection. We reviewed training records, records relating to the management of the service and compliments that the service had received.

# Is the service safe?

## Our findings

Safe – this means people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

### Systems and processes

- Staff had received training in safeguarding people and understood their responsibilities to ensure that people were protected from harm.
- Information about safeguarding was available to people using the service, staff and visitors and included how to raise any concerns.
- The registered manager knew the history of the staff that they employed. They had ensured that the staff they recruited were competent and of a good character, however this information was not always recorded. The registered manager agreed to improve this area.

### Assessing risk, safety monitoring and management

- Relatives felt that people were safe while staying at Penny Meadow. We saw a comment from a relative which said, "We are able to relax and enjoy our break knowing that [person] is safe and well cared for."
- People's support plans contained risk assessments linked to people's needs and wishes. These explained the actions staff should take to promote people's safety and ensure their needs were met appropriately.
- Where people could become upset or anxious, staff knew how to respond to help reduce any distress or risk of injury to the person or others. Guidelines were in place which detailed an appropriate person-centred response including the person's preferences for support in these circumstances and the strategies to use.
- Environmental risks were assessed and regularly reviewed. Where issues had been identified for action, for example, from the fire risk assessment, these had been addressed and signed off as completed.
- The environment was safe and well maintained. Emergency plans were in place to ensure people were supported in the event of a fire.

### Learning lessons when things go wrong

- Incidents and accidents were recorded and reviewed by the registered manager to identify any areas where support could be improved to prevent re-occurrence.

### Staffing levels

- There were enough staff to support people safely. The registered manager considered the skills and experience that each staff member had when planning the rota to ensure that people were supported by competent staff who knew them well.

### Using medicines safely:

- The service had systems in place to manage medication and people were supported to take their medication safely.
- Staff completed training in medication, and records showed that that medication had been administered

as prescribed.

- Where people received medication 'as and when required', there were clear guidelines in place about when this should be taken, the dosage and the reason it may be required.

#### Preventing and controlling infection

- Staff completed training in infection control. Information about how to prevent the spread of infection, such as effective hand washing, was available in the service.
- The service was clean and fresh.







# Is the service effective?

## Our findings

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

People's outcomes were consistently good, and our observations and the feedback we saw confirmed this.

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

- The registered manager supported staff to provide support in line with best practice guidance. ●A behavioural therapist had recently been involved to monitor incidents and provide additional guidance to the team on the best way to support one individual.
- Support plans contained information about people's diverse needs and included their preferences in relation to culture, religion and diet. Staff received training in equality and diversity.

Staff skills, knowledge and experience

- Staff were competent applied their knowledge and experience within their roles which led to good outcomes for people and supported a good quality of life.
- Staff received an induction when they first joined the service. Training was provided in subjects including food hygiene and first aid and received training specific to individual needs, for example, epilepsy and diabetes.
- Staff felt supported and received supervision. One staff member said, "I receive supervision every six to eight weeks."

Supporting people to eat and drink enough with choice in a balanced diet

- People could choose what they wanted to eat. Staff supported people to try and maintain a healthy diet.
- Staff were aware of people's food allergies and where people needed their food to be prepared in a specific way, this was catered for.

Staff providing consistent, effective, timely care

- People had achieved positive outcomes through the review of the communication systems that they used. This review had involved healthcare professionals such as a Speech and Language Therapist (SALT).
- Staff had received communication awareness training to ensure they supported people effectively.
- The registered manager supported people and their families at healthcare appointments.

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

- The two bedrooms were decorated in a gender-neutral style and people could choose which room they wished to stay in.
- The environment was warm, welcoming and comfortable with photos that showed people taking part in activities.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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 with appropriate legal authority. 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.

- Staff ensured that people were involved in decisions about their care; and knew what they needed to do to make sure decisions were taken in people's best interests.
- Where people did not have the mental capacity to make decisions, they were supported to have maximum choice and control of their lives.
- Staff supported people in the least restrictive way possible and the policies and systems in the service supported this practice.
- Staff had received training in the MCA and understood the importance of gaining consent before providing support.

# Is the service caring?

## Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- We saw that people were treated with kindness and the staff member ensured that the person was not discriminated against in any way. The staff member showed a good awareness of people's individual needs and preferences.
- Support plans recorded people's likes and dislikes.

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

- The staff team understood people's communication needs and support plans detailed how these needs should be met including providing information in the individual's preferred way.
- People had choice about what they wanted to do and where they wanted to be within the service and the staff member respected their choices.
- The registered manager supported people and their relatives to sources of advice and support or to independent advocates. An advocate ensures that the individual is central to any decisions made and that their rights are upheld.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect and provided compassionate support in an individualised way.
- People's confidentiality was protected. Guidance was in place to ensure staff checked the content of shared information to support people's rights.
- People were encouraged to be as independent as possible including taking part in cooking and daily living tasks. For example, we saw one person being encouraged to put their laundry into the washing machine.

# Is the service responsive?

## Our findings

Responsive – this means that services met people's needs

People's needs were met through good organisation and delivery.

### Personalised care

- People's likes, dislikes and what was important to the person were recorded in people's support plans and staff had a good awareness of people's preferences. For example, one person preferred to stay in a particular bedroom during their stay and this was facilitated to ensure that the person felt comfortable.
- Tablets had been bought by the service to provide additional choice of films that people could watch to meet their interests.
- People could take part in a wide range of activities to meet their individual needs which were organised by the day service that ran alongside the respite service. Activities included tobogganing, archery, den building and bowling. Many of these activities took place at weekends which enabled people staying at the service to take part.
- The service had membership to a local gym and swim facility that people could access and one person had accessed this facility on the day of inspection.
- People and their families had up to date information about events that had happened and events planned for the following month through a newsletter called, 'The Meadow'. The newsletter also celebrated people's achievements.
- Where people had cultural needs, these were respected and people were supported accordingly to ensure these needs were met.

### Improving care quality in response to complaints or concerns

- The complaints process was clearly displayed with the service.
- Staff worked to resolve any issues at the time they were brought to their attention and tried hard to provide support in the preferred way to minimise the possibility that anyone would be unhappy with the service.
- The service had not received any formal complaints but a system was in place to deal with any concerns that were raised.

### End of life care and support

- End of life care and support was not provided due to the nature of the service.

# Is the service well-led?

## Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

The service was consistently well managed and well-led. Leaders, and the culture they created, promoted high-quality, person-centred care.

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- People's records were well organised, and regularly checked to ensure the information was up to date and accurate for each period of respite.
- Staff were positive about the service. One staff member said, "Everyone is eager, bright and bubbly. I have lots of support around me and can always have a word with [registered manager]."

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The registered manager completed spot checks on a wide range of areas of service provision.
- Effective communication systems were in place to ensure that staff were kept up to date with any changes to the service provision.
- The vision and values of the service were displayed on the website and through the statement of purpose. The registered manager was passionate about the service they provided and its values.

Engaging and involving people using the service, the public and staff

- The registered manager and the staff team knew people and their families well which enabled positive relationships and good outcomes for people using the service.
- People and their relatives completed a questionnaire at the end of their respite stay to provide feedback on the service they received. The feedback received was positive. Comments included, "I always have a lovely time at Penny Meadow." And, "Thank you for making [person's] first overnight stay enjoyable and reassuring."

Continuous learning and improving care

- Information gathered from audits and from the review of incidents and accidents was used to develop the service and make improvements.
- The registered manager demonstrated an open and positive approach to feedback and to developing the service. A development plan was in place and action taken in line with identified timescales.

Working in partnership with others

- The service played an active role within the community and had links with other resources and organisations to support people's preferences and meet their needs. For example, coffee mornings had been held to raise money for local charities and the service had delivered newsletters for the local parish council.

