

Peace Manor Residential Care Limited

Peace Manor Residential Care Ltd - Ceres Road Unit Plumstead

Inspection report

12 Ceres Road
London
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Tel: 02083164297

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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

Peace Manor Residential Care Ltd - Ceres Road, provides care and support for people with mental health needs. It can accommodate up to four people. At the time of the inspection the service was providing care and support to 4 people.

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

There were safeguarding procedures in place and the registered manager staff had a clear understanding of these procedures. Appropriate recruitment checks had taken place before staff started work. There were enough staff to meet people's needs. People's medicines were managed safely. There were effective systems in place for monitoring and learning from incidents and accidents. The service had procedures in place to reduce the risk of infections.

People's care and support needs were assessed when they moved into the home. Risks to people had been assessed to ensure staff could meet their needs safely. Staff were supported through induction, training, and regular supervision. People were supported to maintain a healthy balanced diet and they had access to health care professionals when they needed them. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People had been consulted about their care and support needs. Staff understood the importance of working within the principles of the Equality Act and supported people in meeting their diverse needs. There was a complaints procedure in place and people said they were confident their complaints would be addressed.

The registered manager and staff worked in partnership with health and social care providers to plan and deliver an effective service. The provider took people using the service and staff's views into account through surveys. There were effective systems in place to monitor the quality and safety of the service and any learning was identified and acted on. Staff enjoyed working at the home and said they received good support from the registered manager.

Rating at last inspection. The last rating for this service was Good (published 27 November 2017).

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

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 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.

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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.

Inspection team

The inspection was carried out by 1 inspector.

Service and service type

Peace Manor Ceres Road 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. Peace Manor Ceres Road is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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

We gave the service 24 hours' notice of the inspection. This was because the service is small and people are

often out and we wanted to be sure there would be people at home to speak with us.

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 (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 two people living in the service about their experience of the care provided. We also spoke with two care staff and the registered manager. We reviewed a range of records. This included four people's care records and medication records. We looked at staff files in relation to recruitment and staff training. We also reviewed a variety of records relating to the management of the service including quality monitoring checks and audits and policies and procedures.

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. 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; Learning lessons when things go wrong

- People were protected from abuse. There was a safeguarding policy in place and training records confirmed that staff had received training on safeguarding adults from abuse. A person using the service said, "I have no concerns, I feel safe living here."
- Staff told us they would report their concerns to the registered manager or the CQC or the local authority if needed. The registered manager told us they would report any allegations of abuse to the local authority and the CQC.
- The provider and staff understood the importance of reporting and recording accidents and incidents. We saw that where incidents or accidents had occurred these were discussed with staff during team meetings.

Assessing risk, safety monitoring and management

- Risks to people were identified, assessed, and reviewed to ensure their needs were safely met. Assessments included the levels of risk for people in areas for example, mental health deterioration, self-neglect, non-compliance of medication and verbal aggression. Risk assessments included crises action plans with information for staff about the actions to take to make sure people were cared for and kept safe. Actions included supporting people to understand their treatment plans and seeking help from emergency services if necessary.
- Staff had a good understanding of people's needs in relation to risk. They told us how they supported people when they presented specific behaviours or refused medicines by following people's individual care plans and crises management plans.
- People had individual emergency evacuation plans (PEEPS) which highlighted the level of support they required to evacuate the building safely.

Staffing and recruitment

- We observed that staffing levels at the service were meeting people's needs. A person told us, "There is always enough around, they [staff] rotate."
- The registered manager told us staffing levels were arranged according to people's care and support needs. There was a floating staff service available to support people to hospital appointments or other arranged activities. Staff told us, "If we need more staff, we can get them when we need them."
- Robust recruitment procedures were in place. Recruitment records included application forms with full employment histories, employment references, proof of identification and evidence that a Disclosure and Barring Service (DBS) check had been carried out. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People were receiving their medicines as prescribed by health care professionals. A person told us, "Staff help me with my medicines, I get them every day at the same times."
- People had individual medication administration records (MAR) that included their photographs, details of their GP and any allergies they had. MAR records had been completed in full and there were no gaps in recording. Records were kept where people attended hospital appointments to receive their medicines from health care professionals.
- Medicines were stored securely, and daily room temperature monitoring was in place and recordings were within the appropriate range.
- Regular audits were completed to ensure people received their medicines on time. There were arrangements in place for receiving medicines into the home and for the disposal of any unneeded and unused medicines.
- Staff responsible for administering medicines had received training and their competency to administer medicines safely had been assessed by the registered manager.

Preventing and controlling infection

- The provider had appropriate systems to help prevent and control infection. These included policies and procedures which had been reviewed and updated in line with government guidance. Training records confirmed that staff had completed training on infection control.
- The service was clean, free from odours. We saw the provider carried regular infection control audits at the service.
- Staff told us they had access personal protective equipment when they needed them.

Visiting in care homes

- The provider had visiting arrangements in place that was in line with government guidance. Visitors were supported to follow government guidance on hand washing and sanitising.

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 our last inspection we rated this key question Good. The rating for this key question has remained Good. 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 care, and support needs were assessed when they started using the service. Assessments covered aspects of people's care and support needs for example, with medicines, social needs, and health care needs. Assessments were used to draw-up care plans, risk assessments and crises management plans.
- People, their relatives, where appropriate, and health and social care professionals contributed to these assessments to ensure the person's individual needs were considered and addressed. People's care plans, risk assessments and crises management plans were kept under regular review.

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

- The provider worked in partnership with GP's and other health and social care professionals to plan and deliver an effective service. People's care records included evidence of regular contact with health care professionals for example, the GP, dentists, opticians, occupational therapists, community psychiatric nurses and the mental health team.
- We saw records of people's health care appointments, the reason for the appointment, the outcome, and any recommendations. Monthly progress reports were completed by staff along with people using the service and these were shared with appropriate health care professionals.
- A health and social care professional told us; "The service has continued to share relevant information about our clients (people using the service) with us without which our joint working relationship would be ineffective, for example, during community review meetings. The service continues to work jointly with our clients and in direct consultation with the clients' family and our team to ensure that the goals set out in their respective care plans are achieved."

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

- People told us they were encouraged by staff to eat healthy meals. Care records included assessments of people's dietary requirements and any support they needed to maintain a balanced diet.
- A person said, "I cook my own meals, sometimes staff help me, but I do it mostly on my own. I like to go to the local shops to buy my own food and I also like to go to local cafes." A second person told us, "The food is good, I cook my own." A staff member told us this person went to regular cookery classes.

Staff support: induction, training, skills and experience

- Staff had the knowledge and skills required to meet people's needs. A staff member told us, "I am up to date with all my training. The mental health training has been particularly helpful."
- Training records confirmed that staff were up to date with training the provider considered mandatory.

This training included health and safety, food safety, first aid, fire safety, safeguarding adults, infection control, moving and handling, and the administration of medicines. They had also completed training relevant to the needs of people using the service, for example, mental health awareness, substance misuse and the Mental Capacity Act 2005 (MCA).

- Records also confirmed that staff received regular supervision from the registered manager.

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

- The service was suitably adapted to meet people's needs. People told us they were encouraged and supported to decorate their own rooms.
- There was a garden at the rear of the home with suitable seating for people to enjoy when they liked.

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 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 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The registered manager told us that none of the people currently using the service were subject to any restrictions of their liberty. They told us if they had any concerns regarding a person's ability to make specific decisions they would work with them, their relatives, if appropriate, and the relevant health and social care professionals in making decisions for them in their 'best interests' in line with the MCA.
- Staff received training on the MCA and people's rights were protected because staff acted in accordance with the MCA.

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 our last inspection we rated this key question Good. The rating for this key question has remained Good. 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: Supporting people to express their views and be involved in making decisions about their care

- A person using the service said, "The staff are good, I have no issues with them. I am well treated and well looked after." A second person told us, "Yes the staff are good to me."
- Staff told us they had received training on equality and diversity.
- People were involved in making decisions about their care. A person said, "I have a care plan and a key-worker. They talk with me about what I need. I have signed my care plan and I am happy with what's in it." Care records confirmed that people had been fully involved in planning for their care needs. People had signed their care plans to agree with the decisions made.
- A staff member told us, "We hold regular key-worker meetings with the people we support. We write progress reports and review the care plans with them." A key-worker is a staff member that coordinates all aspects of care and communication for the person, their family members and carers, and the services that are involved.

Respecting and promoting people's privacy, dignity and independence

- People told us their privacy and dignity was always respected. Staff told us they made sure people's privacy and dignity was respected by knocking on doors and asking people for their permission before entering their rooms.
- Staff told us they supported people with their mail where required. They gave people their letters and depending on their needs they offered support.
- Staff told us that people currently living at the home could do most things for themselves, some people required encouragement with daily living tasks such as laundry and tidying their rooms.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question Good. The rating for this key question has remained Good. This meant people's needs were met through good organisation and delivery.

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

- People had care plans that described their health and social care needs and included guidelines for staff on how to best support them.
- Staff had a very good understanding of people's needs. They were able to tell us in detail about people's needs and wishes and how they liked to be supported. For example, staff told us how they supported people to appointments and with specific behaviours.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were assessed when they started to use the service.
- The registered manager told us that information was provided to people in ways they understood. They said if people required information in a different language or visual aids this would be made available to them.

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

- A person told us, "I like to go to the local library to read. I go to the local shops and cafes too. The manager has made referral to the gym for me. I am looking forward to going there." The registered manager told us another person had been enrolled to start a course at a local college. A staff member told us another person regularly attended a local cookery class.
- We saw a log of people's individual daily activities, this included in house cooking and domestic tasks, going for walks around the local area, library visits, and visiting family members.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure in place. The complaints procedure was available in formats that people could understand.
- A person using the service told us, "I have not needed to complain. But if I did I would tell staff or the manager, I am sure they would help me."
- The registered manager told us they had not received any complaints about the service. However, if they

did, they would write to any person making a complaint to explain what actions they planned to take and keep them fully informed throughout.

End of life care and support

- The registered manager told us no one currently living at the service required end of life support. They told us they would work with people's relatives, the GP, and the local hospice to provide people with end-of-life care and support if it was required.

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. 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.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements: 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 service had a registered manager in post. They were knowledgeable about their responsibilities regarding the Health and Social Care Act 2014. They demonstrated good knowledge of people's needs and the needs of the staffing team. There was an on-call system where staff could access management support twenty-four hours a day seven days a week.

- Staff were positive about how the home was run and the support they received from the registered manager. A staff member told us, "I am passionate about giving care. I love working here because the support I get from the registered manager makes my job enjoyable." Another staff member said, "I am well supported by the registered manager. They are the best, they are very supportive, they are like family. The registered manager is always there when I need them."

- The registered manager had a clear understanding of their responsibility under the duty of candour. They told us they were always open and honest with family members and professionals and took responsibility when things went wrong.

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

- We saw completed residents and staff surveys. The residents survey confirmed people had no concerns, and they were happy with the service they were receiving. Staff had no issues and said they would recommend the service to potential service users.

- We saw the minutes from the September 2023 residents meeting. Items discussed at the meeting included menu planning, the complaints procedure, and a fire drill. People's comments and opinions had been recorded in the meeting minutes.

- Minutes from the last staff meeting showed discussion of an incident at the service and the actions staff would take to keep people safe. A staff member told us, "The team meetings are very helpful. We discuss people's welfare, issues in the home, training and things that need following up. The meetings help to give us continuity and direction."

- Staff told us they were proud of their achievements during their time working at the home. A staff member told us, "I had a recent meeting with an occupational therapist (OT) and a person using the service. The OT had worked with the person in the past, the feedback I received from the OT was very rewarding. The OT said the person had learned a lot since we started to support them and was doing much more for

themselves."

- A health and social care professional told us; "The staff and management at the service have always provided us with good, warm, and welcoming reception, and no less so in their relationship with our clients in their community placements. It is for this and their approach to their care and support that we continue to refer our clients to them."

Continuous learning and improving care

- The registered manager recognised the importance of regularly monitoring the quality of the service. They undertook regular audits that covered areas such as people's medicines, infection control, health and safety, fire safety and incidents and accidents. They carried out quality monitoring audits at the service. We saw a report following an audit in June 2023. Areas covered included staff induction, training and supervision, complaints, safeguarding, incidents and accidents and notifications to the CQC.
- We also saw records confirming the fire alarm system and equipment, gas safety and electrical appliances were regularly tested.

Working in partnership with others

- The registered manager told us they worked in partnership with other agencies, including the local authority and health and social care professionals to ensure people received safe and effective care.
- A health and social care professional told us; "Over the years the service has demonstrated that every effort is being made to offer support that allows our clients to continue their recovery journey. The positive feedback that I received from the clients that I have placed at the service is evidence of progress being made in my clients' recovery journey."
- The registered manager regularly attended provider forums run by the local authority where they learned about and shared good practice. They told us they found the forums helpful and had used their learning to improve the service.