

Key inspection report

Care homes for older people

Name:	Peacehaven
Address:	101 Roe Lane/1a Derwent Avenue Southport Merseyside PR9 7PD

The quality rating for this care home is:	three star excellent service
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A quality rating is our assessment of how well a care home is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a 'key' inspection.

Lead inspector:	Date:
Margaret VanSchaick	1 4 1 2 2 0 0 9

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the care home:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

Outcome area (for example Choice of home)

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

This is what people staying in this care home experience:

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Care Homes for Older People can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop

The mission of the Care Quality Commission is to make care better for people by:

- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

Reader Information

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Internet address	www.cqc.org.uk

Information about the care home

Name of care home:	Peacehaven
Address:	101 Roe Lane/1a Derwent Avenue Southport Merseyside PR9 7PD
Telephone number:	01704227030
Fax number:	01704509220
Email address:	care@peacehavenhouse.co.uk
Provider web address:	

Name of registered provider(s):	Peacehaven House
Name of registered manager (if applicable)	
Mrs Lynne Nuttall	
Type of registration:	care home
Number of places registered:	55

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	55
Additional conditions:		
Service users to include up to 55 Old Persons		
The service should employ a suitably qualified and experienced manager who is registered with the Commission for Social Care Inspection		

Date of last inspection									
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Brief description of the care home
Peacehaven is an older property that has been converted into a care home providing personal care for 55 older persons. It is pleasantly situated in a leafy part of Southport close to public transport and within easy reach of the amenities that serve the area. Peacehaven House Trust (registered charity) owns the home and Mrs Lynne Nuttall manages it. Peacehaven currently has 55 single bedrooms placed on two floors. A passenger lift provides access to upper floors. The home offers intermediate care to five persons. All the bedrooms have pleasant views of the gardens. Communal space currently provides 3 sitting rooms, 2 dining rooms and a conservatory. The home has

Brief description of the care home

currently five ramps in place, which enable service users to access the grounds from the front and side doors, with garden furniture suitable for use by service users and their visitors. New footpaths have recently been completed for residents use. The home has a variety of hoists and suitably adapted equipment to assist with the varying needs of service users. There is also a call alarm system throughout the home including all bedrooms.

Weekly fees are £389.

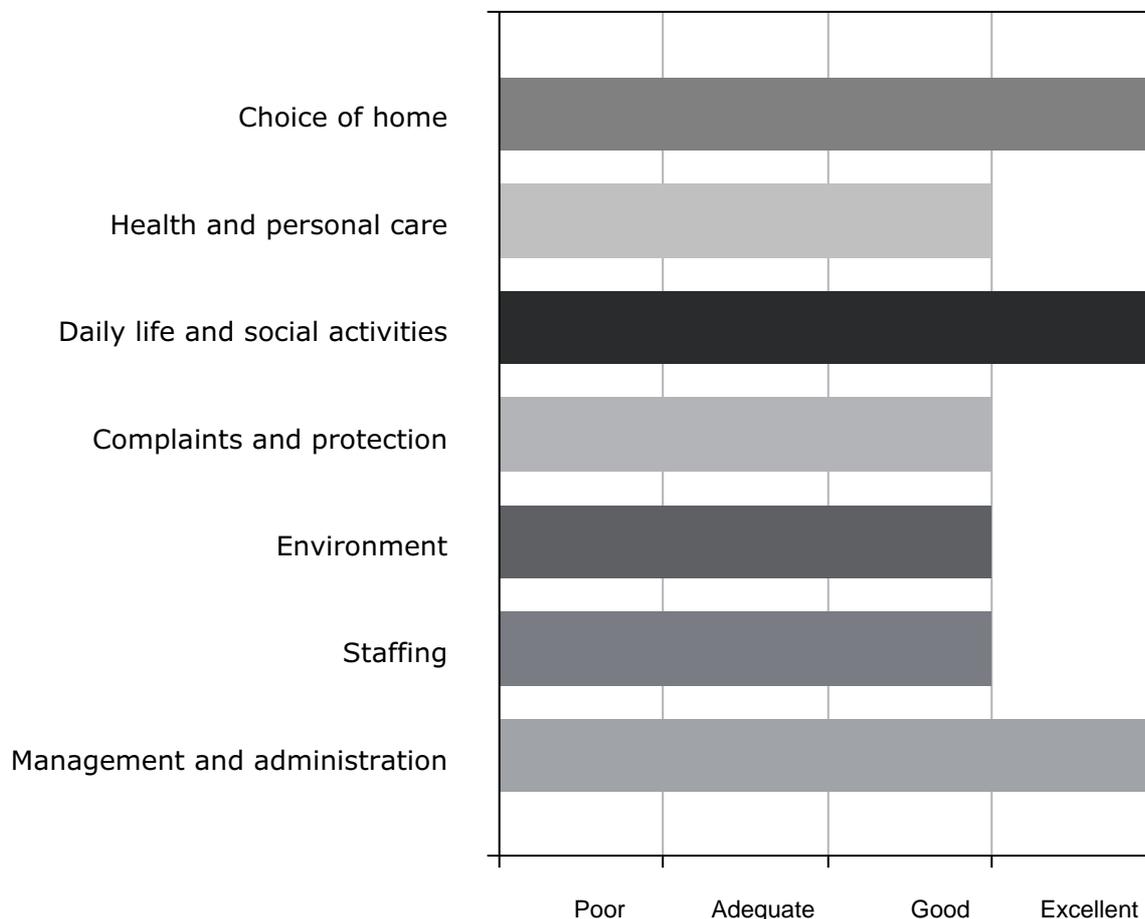
Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

three star excellent service

Our judgement for each outcome:



How we did our inspection:

A site visit took place as part of the unannounced inspection. It was conducted over one day for the duration of 8 hours. 55 residents were accommodated at this time. An expert by experience was also present during part of the inspection.

As part of the inspection process many areas of the service were viewed including residents bedrooms. Care records and other service records were viewed. Discussion took place with some of the residents, staff and relatives. The inspection was conducted with Mrs Lynne Nuttall (registered manager).

During the inspection process 4 residents were case tracked (their files were examined and their views of the service obtained). All of the key standards were assessed and recommendations from the previous key inspection in March 2007 were discussed and had been addressed.

Satisfaction forms 'Have your say about....' were distributed to a number of residents and relatives prior to the inspection. A number of comments included in this report have been taken from surveys and interviews.

An AQAA (Annual Quality Assurance Assessment) was completed by the manager prior to the visit. The AQAA consists of two self assessment questionnaires that focus on the outcomes for people. The self assessment provides information as to how the manager and staff are meeting the needs of the current residents and a data set that gives basic facts and figures about the service including staff numbers and training.

What the care home does well:

The pre admission assessment process is very good and ensures that all enquirers to the service are invited in to see what the service has to provide. The people who enquire are also given detailed information about what it would be like for a prospective resident to live there. Prospective residents are then invited to spend the day at Peacehaven to meet with other residents and staff. This visit will give them a better idea of the service and see if it would suit them or not. During this visit senior staff can carry out an assessment of the prospective residents needs.

Assessments viewed showed that a detailed pre admission assessment has been carried out, which identifies individual residents needs and therefore provides good information to set up a care plan that is specific to the resident.

Residents healthcare needs are met and residents interviewed told us they were happy with the care and support provided. Residents interviewed stated, "I am very well looked after, staff are very kind", "They are marvelous, I like it very much, they listened to me, I was in a bad way. I've got my confidence back".

Residents are actively encouraged to make choices about how they wish to live their lives and also make decisions about how Peacehaven is run. Many of the residents attend residents meetings and some are also in the residents committee. Both groups meet regularly and discuss various items including activities, laundry and other items provided by the service. Residents interviewed stated, "I'm still on the residents committee", "I attend the residents meetings and I am on the residents committee, we can discuss if anything is wrong with your room or laundry, you get a chance to discuss it, that's what it is all about really".

Peacehaven provides a good range of suitable activities for residents. Many of the residents attend either group activities or quieter activities as they wish. Residents are involved in making decisions about what activities they like and give regular feedback to activities staff.

Peacehaven provides a very comfortable and well decorated environment for residents to live in. There are plenty of sitting rooms and dining rooms for residents use.

The garden grounds at Peacehaven are well kept and provide residents with a short walk and seating in the warmer months. One resident canvassed for their views commented, "The gardens (in the summer especially) are a joy to behold and are open to all residents to enjoy".

Peacehaven continues to be very well run by a professional, kind and well trained team of staff. It is run for the benefit of the residents who live there and promotes their individual rights.

What has improved since the last inspection?

The service continues to improve the documentation. In particular the assessment process for prospective residents has improved and information gained in the pre admission process is very detailed and therefore provides a very good standard on which to set up the care plans for prospective residents who take up residence.

Medication records with regard to warfarin has improved therefore showing clear instructions in relation to the daily prescribed dose following clinic appointments.

All new residents medication is checked out thoroughly with their Gp before it is administered by staff to ensure all items are up to date.

The service continues with an annual decoration and refurbishment programme that includes all areas. It is apparent from the tour of the service that residents live in an environment that is cleaned and decorated to a high standard. Kitchen facilities have been upgraded. New dining chairs provide easier access for residents during mealtimes. The main lounge has been redecorated with new carpets fitted. Residents continue to be consulted with regards to colours and where changes are being made. A further 4 en-suite facilities have been provided for residents therefore providing more privacy.

What they could do better:

Peacehaven need to ensure that all medication brought in to the service is recorded. Staff also need to sign each entry. This will make it easier to audit.

All staff application forms need to be dated. This will ensure we know the process of pre employment applications for new staff.

All new staff need to have two written references on record. The use of mobile phone numbers for references is not acceptable.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details on page 4.

The report of this inspection is available from our website www.cqc.org.uk. You can get printed copies from enquiries@cqc.org.uk or by telephoning our order line 0870 240 7535.

Details of our findings

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Outstanding statutory requirements

Requirements and recommendations from this inspection

Choice of home

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.

This is what people staying in this care home experience:

Judgement:

People using this service experience **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The service provides an effective pre admission assessment process that ensures prospective residents and their families are fully aware of what the service has to offer the individual.

Evidence:

The AQAA stated that when anyone makes enquiries about vacancies in the service it is suggested that they can visit at any time without an appointment. During this visit, staff can show prospective residents and their families the facilities and provide information and answer any questions they may have about the service.

In addition to this, prospective residents are invited to spend the day at Peacehaven so that they can have a full assessment of their needs and meet with the residents and staff. Prospective residents are also given a welcome pack, which includes a service user guide. This pre admission process ensures that prospective residents are given as much information as possible and have been able to view the facilities on

Evidence:

offer before making an informed choice.

Prospective residents who are unable to visit the service for assessment are assessed by staff in their homes or at the hospital. One resident interviewed confirmed they were assessed prior to admission. The resident stated, "Lynne came out to see me in hospital".

We case tracked four of the residents and looked at the files in regard to the admission process. All of the residents case tracked evidenced completed pre admission assessments had been carried out. A significant amount of detail is included in this initial assessment process. Information recorded includes previous medical history, reason for admission, personal details, nutritional assessment and the individual residents 24 hour care needs. The persons who carry out the assessment have signed and dated the documentation. Following their first few weeks admission to the service residents now have a 'post admission' assessment so that their care needs are further clarified.

Residents interviewed about the admission process told us they were able to visit the service and meet with residents and staff prior to admission. Surveys completed by residents and relatives confirmed they had received sufficient information prior to admission. One relative commented, "As new people arrive the staff make all newcomers very welcome and do their best to integrate everyone with the rest of the home".

As part of the pre admission process an assessment of the residents proposed bedroom is carried out to ensure it is suitable and any additional equipment needed to support their care needs is put in place prior to admission.

The kitchen is notified of any new admissions and the chef meets with the residents to identify their likes and dislikes. This is documented.

The service no longer provides intermediate care.

Health and personal care

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People's health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Care plans evidence that the individual needs of residents identified during the assessment process were being met and have been reviewed regularly since admission.

Evidence:

Four residents care plans were viewed and this enabled us to see that all of their care needs recorded through the assessment process were being addressed. Residents care plans were in place on admission to the service and drawn up to be specific to the individual resident. The care plans evidenced regular updates when care needs were reviewed. Residents also have night care plans and these were shown to be recorded with some detail. Documented evidence shows that residents agree and sign their planned care. One resident interviewed could not remember seeing her care plan but stated, "We did discuss the care I would need".

Some of the residents have been referred to health professionals and their input is recorded on care documentation. Other health professionals visit the service regularly with care files evidencing these visits and care plans were updated where needed.

Evidence:

Some of the health professional care accessed for residents include dentists, Gp's, district nurses, opticians and chiropodists. Where residents have used the same health professional prior to admission this is continued where possible. Residents who receive district nurse input have separate records kept of prescribed treatments and an up to date record of progress. Where other health professionals visit residents and provide advice and support, staff keep detailed records of their treatment and tests so that the visiting health professional can monitor their progress. Families canvassed for their views were complimentary about the care and support provided for their relative. Relatives commented, "Peacehaven serves every need cheerfully and efficiently", "They care for residents well, I would like to say that my husband is happy and comfortable at Peacehaven"

Residents interviewed about how they felt their care needs were being met stated, "Staff are very good if you have an accident, they give you clean sheets and dressing gown, everything would be clean, staff know how to look after you, nothing is too much trouble", "I like it very much, they look after you very well, I have put on weight since I came in, I was in a mess quite honestly" and "I have seen the Dr a few times and I have my own private chiropodist, they come monthly". Dependency levels were recorded. Residents are encouraged to maintain their independence where possible. Risk assessments were in place to include residents mobility regarding the use of the bath, shower, bed and wheelchair use and include the internal and external environment. Documentation with regard to residents mobility, assessing the risk of a resident falling, ensuring residents have a good diet, monitoring weight gain or loss, care of their skin, which may be at risk due to frail health is commenced on admission to the service. Each area is reviewed regularly and risk assessments and care documentation updated.

Personal routines are identified and addressed in the care plan and include areas such as when they wish to go to bed, get up and bath and shower preferences. There is also a life history document, which includes occupational history, significant life events, hobbies and wartime history where appropriate.

The management of medication is allocated to a senior member of staff therefore they organise and ensure sufficient stocks are in place for residents use. The medication trolleys and storage is stored in a locked room. Two trolleys were in use, both were organised and clean. The two metal cabinets in the store room were organised also. Stock control was good.

Medication records were viewed. All were printed out and clear to follow. One or two of the Aberdeens' (medication records) checked evidenced that on occasion the

Evidence:

amount of medication brought into the service was not recorded on the Aberdeen nor was there a staff signature. Therefore this needs addressing to ensure the service can audit the medication.

We also looked at the records of residents who were prescribed warfarin as these doses can be altered on a regular basis following blood tests and clinic appointments. We observed that this area has improved with clear and accurate documentation that is easy to follow. Residents have a lockable facility in their bedroom should they wish to administer their own medication. A list of staff trained to administer medication was in place. Staff are also provided with regular training in regard to medication administration as evidenced in staff training files.

All of the residents have their own bedrooms and a few have their own en-suite facility therefore providing more privacy. Through speaking with residents and viewing care documentation it is apparent that residents are consulted regularly throughout their stay with regard to care provided. Residents told us that staff respected their dignity and were supportive and kind when providing care. One resident stated, "Staff respect my privacy". Residents were well groomed and wore suitable clothing during the visit. Staff were observed to knock on bedroom doors before entering.

Daily life and social activities

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Residents live in an environment that encourages them to make individual choices and preferences about how they wish to live their lives.

Evidence:

The social histories of residents have been discussed as seen in care documentation. This has enabled residents and their families to give staff some information with regard to how they lived prior to needing care. This useful information enables staff to provide a more personal and individual care and support plan that is suited to their wishes and preferences. Residents interviewed told us that staff were familiar with their needs and provided a friendly and supportive environment. Residents were observed to spend their time as they wished within their abilities and with staff support where agreed. Individual routines are discussed and where possible residents preferences are supported. Care documentation evidences this. Residents interviewed stated, "We get a cup of tea at 6.30am if we want, I get my cup of tea and set my alarm for 7.30am, get up, take it easy and get ready for breakfast at 9am. We can have a cooked breakfast if we want, but some people don't bother with a cooked one. The food is very good, I'm not a big eater but it's good" and "I go to bed at all different times, I ring the bell and if you wanted someone in the night, they would care for you, they will bring you a drink if you want".

Evidence:

The service had many visitors calling throughout the day to visit residents. They were made to feel welcome by staff. There were no visiting restrictions. Relatives interviewed confirmed they are made to feel welcome.

The service employ activities personnel who communicate with the residents on a one to one basis and discuss their preferences. Meetings are also held regularly throughout the year so that residents can give their views on how and where they wish to spend their time. Records are kept of these meetings and minutes published were viewed by us. There are many social activities in the service for residents who wish to participate in. This months activities and venues were on display and included, church visits, singing, Communion, bell ringing, bingo, crafts, making decorations for Christmas, music, visits to garden centres, clothing party and quizzes. Residents are encouraged to join in where they wish to. Some of the residents were observed to make use of the quieter lounge, spending their time in smaller groups. Some of the residents are still involved in the local quiz tournaments and get to meet other people who live in local homes. A computer has also been made available for residents use.

Residents interviewed confirmed there were sufficient and suitable activities for them. residents interviewed stated, "I'm enjoying the nice Christmas music, I do the quizzes when they are here for it and I have been reading about searching for energy" and "I like to go for walks or concerts. I go out a lot with my daughter into town and meet my sister for lunch. I also read a lot and sit in the conservatory making cards".

Residents interviewed confirmed they attended residents and committee meetings and were able to participate and have their views listened to and actioned. Residents interviewed stated, "I'm still on the residents committee and happy", "I attend residents meetings and I'm on the residents committee, if you have anything wrong with your room or your laundry you get a chance to discuss it, that's what it is all about really".

Residents religious needs are documented and weekly services take place within the service. One of the residents interviewed confirmed regular church services are held. The resident stated, "I am Church of England, I attend Communion each week". Peacehaven promotes the rights of the individual and where possible encourage local churches in the area to support the residents religious beliefs.

Residents canvassed for their views about how the service is run were positive in their views. Residents commented, "They have created a warm and friendly atmosphere with the emphasis on 'HOME' and the catering is excellent. The gardens, in

Evidence:

summertime especially, are a joy to behold and are open to all residents to enjoy" and "The home is clean, they do the food well and I enjoy the activities".

The menu for today's mealtimes was on display for residents to view. The menu showed two choices for the starter and main course and three choices for puddings. Residents interviewed confirmed if they wished something different to the choices, they were accommodated. Documentation evidenced that all new residents meet with the chef to discuss their likes and dislikes. Residents confirmed through discussion that their families and friends continue to join them for meals when they wish to.

Complaints and protection

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

If people have concerns with their care, they or people close to them know how to complain. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Residents are protected by the service policies and procedures.

Evidence:

The service complaints procedure is on display in the front hall, other communal areas and also in residents handbooks. The complaints book showed no complaints have been recorded from January 2009. The manager confirmed that no complaints had been made in the last few months. When there have been concerns raised in the past, the manager keeps the Commission fully informed. Local advocacy contact details are on display for any resident who needs their assistance. Residents interviewed told us they had no concerns about how the service was run and felt confident about approaching staff. One resident interviewed stated, "I have no worries".

The service have an open door policy so that residents and their relatives can approach management, senior staff or trustees and raise any concerns they have in confidence. Residents relatives were observed interacting with staff during the visit.

The manager told us that the service continue to hold regular 'praise and complaints' meetings with the residents. The minutes of the last two meetings in August and November 2009 were viewed and showed that they are held with residents every two to three months. Any issues that residents would like to discuss or ideas they would like implemented are discussed at these meetings.

Evidence:

A residents committee also meets regularly and ideas are raised, changes brought up and feedback from the various activities discussed.

The service have a copy of the local adult protection procedure and the manager has a clear understanding of how to deal with any concerns that may occur. The deputy manager continues to carry out one to one and small workshops with staff to ensure they continue to understand their role if any concerns are raised when they are on duty. Staff interviewed understood the basics of the procedure.

A whistle blowing procedure is in place.

All residents have access to a lockable facility in their bedrooms and they hold the key.

Environment

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People stay in a safe and well-maintained home that is homely, clean, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Residents live in a comfortable, safe and well maintained environment.

Evidence:

A tour of the service took place and this showed that residents live in a clean, warm and very well decorated home. The entrance hall has a large area designated for residents use and includes today's activities and food menu.

The large dining room is beautifully decorated to a high standard with dining tables seating up to six residents. New 'sliding' dining chairs have been provided for some of the residents for easier movement. Tables were decorated with linen napkins, matching crockery, cutlery and festive arrangements were on display for residents to enjoy. Various fruit juices and chilled water was made available for residents to take when they wish.

There are various lounges throughout the service for residents use. The 'quiet' lounge overlooking the front garden is furnished with comfortable armchairs, fire surround and small library. A television was in place but not switched on and residents were able to sit quietly, reading or enjoying the budgie.

The other front lounge had the television on and residents were interacting with staff whilst making Christmas decorations. The residents were comfortably seated and

Evidence:

enjoying their surroundings. The other sitting room/dining rooms viewed were all decorated to a very good standard, with the conservatory displaying a fish tank for residents to enjoy. Computer access for residents is also located in this area also. Seating areas for residents were spacious and homely.

Residents bedrooms are decorated to a good standard and well furnished. All of the bedrooms are individualised to the residents preferences where possible. Residents interviewed were happy with the environment they lived in. One resident stated, "I love my bedroom, I love nice things, I have all my nice things with me". There are sufficient bathroom facilities throughout the service, which offer residents choices with some residents having the benefit of an en-suite facility. Although one relative canvassed for their views stated, "I would like more toilets". Additional equipment has been fitted to bathrooms to ensure easier access for residents and hoists were provided.

Externally the garden grounds are very well maintained and many of the residents are able to enjoy the view in winter of the mature shrubs in place. There is easy ground floor access to the gardens and residents have been able to enjoy moving around the grounds safely.

The kitchen was clean, well organised and all equipment viewed showed that it was well maintained. All records were up to date. The cleaning schedules were adhered to as the kitchen was very clean. Kitchen surfaces including walls and floors were tiled. Stores evidenced plenty of food for residents to eat. Fresh fruit and vegetables were in evidence and fresh baking is done each day for residents afternoon tea. Fridges showed food was stored correctly.

The service laundry is situated away from the kitchen and specified laundry staff manage this facility. Staff have sufficient equipment to provide an effective laundry for residents clothing. Floors and walls were tiled and in a clean condition. The laundry was organised and staff had hand washing facilities and protective clothing to carry out their duties.

There were up to date policies and procedures with regard to infection control and staff have attended training in this area.

Staffing

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have safe and appropriate support as there are enough competent staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Residents are being cared for by kind and well trained staff.

Evidence:

The staffing rota evidences sufficient staff are on duty in all departments to manage the service effectively. Four care staff are also on duty throughout the night. The service try to ensure as many staff as possible participate in the NVQ training. 80% of care staff are qualified to NVQ Level 2 or above and 70% are studying towards the next level. This exceeds the standard in this area.

Four of the staff files were viewed including their training records. All of the staff files viewed held letters of appointment, completed application forms with detailed work history, signed contracts, previous training attended, references, interview notes, copies of documents such as passports and birth certificates, signed training contract, staff rules book, signed and dated induction record, training courses, medical questionnaires, appraisals, supervision and police check dates.

One of the staff application forms was not dated and one of their references had referred to a mobile number communication. Therefore the service needs to ensure these areas of the application for staff employment are tightened up. All staff have police checks in place.

Evidence:

An internal trainer carries out a lot of the training including abuse and external trainers are brought in for equality and diversity, death and dying, Parkinson's, abuse and stroke. The training plan evidences the planned training for the next year. Senior staff have recently attended the Deprivation of Liberty training and are to cascade that information to the rest of the staff over the next few months.

Training records were viewed of all four staff and their records showed up to date training for health and safety, first aid, manual handling, NVQ, infection control, communication, basic food hygiene, fire and abuse. Equality and diversity, communication and understanding of the older person has also been provided.

Staff interviewed during the visit were happy working at Peacehaven. Some of the staff comments include:

"It's not too bad, I like it, senior staff are fair and approachable" "I think the care is good, residents are happy, there are always activities going on" "We have a handover each shift and there is always enough staff on duty, we get trained quite a lot. NVQ 3, manual handling, health and safety, infection control, basic food hygiene, fire, abuse and communication". "I had my induction in my first two weeks and also did other training and commenced NVQ 2". "I love the job. I really enjoy it, it's great. Senior staff are approachable". "There are a lot of activities. games, quizzes and days out for residents". "We have had one to one talks regarding abuse and questionnaires for the managers, we get enough training. Residents sometimes ask for a lady to assist and this is supported". "We get a lot of training, everything is up to date. It's a good group of people to work with, we have good support and morale is good. We can always go and talk to one of the managers, they will help if they can. Residents have the same gender staff to assist them. We check the residents regularly, care is not compromised, we have two staff to change and turn some residents".

One resident canvassed for their views about how Peacehaven was run commented, "They do their best under often difficult circumstances". Residents interviewed about staff were complimentary. Residents interviewed stated, "Staff are nice, they are very good really", "Staff are kind", "Staff are marvelous, staff have helped me a lot, they have listened to me, I was in a bad way, I've got my confidence back" and "I think they are excellent, they are kind, they can't do enough for you 24 hours a day".

Management and administration

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

This is what people staying in this care home experience:

Judgement:

People using this service experience **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Peacehaven provides a well managed service that is run for the benefit of the residents who live there.

Evidence:

The registered manager has been in post for approximately 7 years and leads a team of staff who have worked together for some years now. This provides continuity for residents. The manager continues to keep up to date and training records evidence training attended over the past year.

Staff and residents spoken with find the manager very approachable.

The manager meets with the Board of Trustees every two months to review and discuss any future plans or issues. The manager is also able to benefit from their support when needed. The manager and chairperson meet weekly and discuss any issues that may occur.

Evidence:

The service have effective quality assurance systems in place. The service has also gained an external quality assurance award. Residents meetings are held 2-3 monthly throughout the year and minutes of these meetings are published. Other meetings held regularly throughout the year include care staff, activities, senior staff and kitchen staff. Minutes of all of these meetings are published and we viewed some of them during the visit. Copies of the residents meetings are displayed for their use. Praise and complaints meetings for residents are also held regularly, which enables resident to praise the way the service is managed or raise issues that they may feel needs addressing. The service also canvass residents and their relatives views throughout the year. The commission have canvassed the views of residents and their relatives and all gave positive feedback. One of the residents canvassed for their views commented, "I cannot think of anything Peacehaven can do in the way of improvements".

The service has an annual development plan and it is apparent through discussion with the residents that they are kept well informed of any new changes and developments being planned.

Policies and procedures continue to be reviewed annually and updated where needed.

Residents financial records were very detailed and all financial transactions were accounted for. These records show regular audits are carried out throughout the year.

Safe working practices are in place and staff are updated throughout the year with regular mandatory training evidenced following discussion with staff and staff training records. Hazardous substances are stored separately and securely. Maintenance records show that all health and safety checks are carried out regularly and were up to date. Regular servicing of gas appliances, boilers, electrical systems, fire and other equipment were up to date with certificates evidencing this. Risk assessments were in place and window restrictors were in place throughout the service. Accident records have been completed correctly and the manager and senior staff are aware of RIDDOR (Reporting of Disease and Dangerous Occurrences Register).

Are there any outstanding requirements from the last inspection?

Yes

No

Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action

Requirements and recommendations from this inspection:

Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action

Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations
1	9	The inspector recommends that all medication brought into the service for residents use should have the amount recorded on each medication record. The record should also evidence staff signatures. This will ensure easier auditing of medication.
2	29	The inspector recommends that all application forms should be dated on completion. This will evidence the application process of prospective employees.
3	29	The inspector recommends that all new employees should have two written references. Mobile numbers for references is not sufficient. This will ensure authenticity of the references.

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