

Appletree House Residential Care Home Limited

Apple Tree House

Residential Care Home

Limited

Inspection report

31 Norwood
Beverley
Humberside
HU17 9HN

Tel: 01482873615

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05 June 2019

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28 June 2019

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?

Requires Improvement ●

Summary of findings

Overall summary

About the service: The service is a care home for up to 14 people some of whom have a learning disability and/or autism. When we inspected 14 people lived at the service and two additional people were receiving support in the community. The size of service meets the best practice model of support for people with a learning disability and/or autism and was designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance.

People's experience of using this service: We received very positive views from people about the support provided to them. People said they felt safe and staff were kind and respectful. People were supported with their communication needs. Staff demonstrated effective skills in British sign language. People told us they felt they were able to communicate their needs to staff.

One event had not been notified to CQC in a timely manner. This is being looked at outside of the inspection process. The registered manager had not ensured all staff had an appraisal a recorded competency check or that 'when required' medications had a protocol for administration in place. Action was taken during the inspection to address these gaps.

People received their medicines safely and on time and their health was well managed. Staff had positive links with health care professionals which promoted people's wellbeing.

Care and support was tailored to each person's needs and preferences. People and their relatives were fully involved in developing and updating their planned care. People had been supported to develop and maintain positive relationships with friends and family.

Recruitment checks were carried out to ensure staff were suitable to work in the service. Staff had received appropriate training and support to enable them to carry out their role. They worked with people to overcome challenges and promote their independence. Staff encouraged positive risk taking so people could experience new things and develop. This had led to people feeling fulfilled and living an active life.

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 and staff told us the registered manager and senior team were approachable and listened to them when they had any concerns. All feedback was used to make continuous improvements to the service.

Rating at last inspection: Good (Published 13 March 2017)

Why we inspected: This inspection was a scheduled inspection based on the previous rating.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as

per our re-inspection programme. If any concerning information is received, we may inspect sooner.

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our Safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our Effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was not always well-led.

Details are in our Well-Led findings below.

Requires Improvement ●

Apple Tree House Residential Care Home Limited

Detailed findings

Background to this inspection

The 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: The service is a 'care home'. People in care homes receive accommodation and personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at on this inspection.

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

Notice of inspection: The inspection was unannounced.

What we did: Before the inspection we reviewed information available to us about this service. This included details about incidents the provider must notify us about, such as abuse; and we sought feedback from the local authority. The provider sent us a provider information return prior to the inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection we spoke with the registered manager, two team leaders and one support worker. We spoke with four people and three relatives.

We looked at two people's care records in full and two care records in part. This included medication administration records and a selection of documentation about the management and running of the service. This included recruitment information for two members of staff, staff training records, policies and procedures, complaints and staff rotas.

Is the service safe?

Our findings

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

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

Systems and processes to safeguard people from the risk of abuse; Staffing and recruitment

- People were safeguarded from the risk of abuse. Staff demonstrated a good awareness of safeguarding procedures; they knew who to inform if they witnessed or had an allegation of abuse reported to them.
- The registered manager knew to liaise with the local authority if necessary; any incidents had been managed well.
- People and their relatives told us they felt safe. A relative told us, "I certainly feel people are safe here."
- There were enough staff available to meet people's needs.
- Staff were recruited safely; appropriate checks were carried out to protect people.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff understood where people required support to reduce the risk of avoidable harm. Care plans contained explanations of the control measures for staff to follow to keep people safe.
- People were supported to take positive risks to aid their independence. This included physical activities. One person told us, "Staff have let me take more risks and it has made me more independent."
- Accidents and incidents were responded to appropriately. These were monitored and the registered manager was developing their audit process to record any lessons learnt.

Using medicines safely

- Medicines were safely received, stored, administered and returned to the pharmacy when they were no longer required.
- People were encouraged to manage their own medicines where they had those skills.
- Protocols for 'as and when required' medicines were not in place for all medicines to guide staff when medicines were required. The registered manager stated these would be implemented following our feedback.

Preventing and controlling infection

- Staff followed good infection control practices and used personal protective equipment (PPE) to help prevent the spread of healthcare related infections.

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.

People's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- Staff received supervision but not appraisals. Following our feedback, the registered manager reviewed their supervision and appraisal paperwork and told us they would complete appraisals with staff.
- People and relatives felt staff had the right skills to look after them. One relative told us, "Staff are always on training, they really do keep up to date."
- A staff induction and training programme was in place. Checks of staff's competencies were not recorded. The registered manager told us they would ensure these were recorded.
- Staff felt supported.

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

- Assessments of people's needs were comprehensive, and care and support was regularly reviewed.
- Care and support was planned, delivered and monitored in line with current best practise and evidence based guidance.

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

- People were involved in meal choices and supported to maintain a balanced diet.
- People were protected from risks of poor nutrition and dehydration.

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

- The service provided a homely environment which met the needs of people.
- Adaptations had been made where necessary to meet people's needs.

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

- Guidance and support from healthcare professionals was obtained and followed. Information was shared with other agencies if people needed to access other services such as hospitals.
- People had received support to maintain their health with regular access to GP's, dentists and other services.
- People's health outcomes had been improved. Staff positively challenged health professionals' opinions and requested second opinions if they felt actions were not in the persons best interests.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible,

people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- People were involved in decisions about their care.
- Where people did not have capacity records showed decisions had been made in people's best interests.

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.

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

- People were treated with kindness and the positive relationships they had with staff impacted positively on their feelings of wellbeing. People were actively listened to and their choices respected.
- Where people were unable to express their needs and choices, staff understood their way of communicating. Staff observed body language, eye contact and used British sign language to interpret what people needed.
- Staff showed genuine concern for people and were keen to ensure people's rights were upheld and that they were not discriminated against in any way. Staff actively challenged discrimination.
- People's right to privacy and confidentiality was respected.

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

- Staff supported people to make decisions about their care; and knew when people wanted help and support from their relatives. Where needed they sought external professional help to support decision making for people such as advocacy services.

Respecting and promoting people's privacy, dignity and independence

- People were supported to maintain and develop relationships with those close to them, social networks and the community. A relative told us, "The whole family have noticed a massive change in [name of person] since moving here, [name of person] is more sociable and independent, they do much more for themselves."
- People were supported to focus on their independence in all areas of their lives. People were supported to be independent in their ideas and choices and this meant people enjoyed freedom and control of their life.
- People were supported to grow in confidence and develop their skills. One person told us, "The staff have helped me find new interests and skills and I have developed in confidence because of this.'

Is the service responsive?

Our findings

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

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

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People's needs and information on how best to meet their preferences were identified, met and reviewed.
- Staff were knowledgeable about people and had a good understanding of their preferences and interests; this enabled them to provide personalised care.
- People were very well supported to develop and maintain friendships and relationships. People were supported to use technology to speak to relatives.
- Access to personalised activities supported people to live an ordinary life which gave them opportunities to meet new people. One person told us, "I am busy all the time, there is only one or two days a week where I am not out doing things."

Meeting people's communication needs

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

- People's communication needs were identified, and reasonable adjustments were made where appropriate around their learning disability and/or autism. Information was presented in a way people could understand whether this was through British sign language or pictorial and easy read formats.

Improving care quality in response to complaints or concerns

- People knew how to provide feedback to the staff and management team about their experiences of care and the service provided a range of accessible ways to do this.
- People and relatives knew how to make complaints should they need to. They told us they believed they would be listened to and action would be taken. The registered manager acted upon complaints in an open and transparent way. They used any complaints received as an opportunity to improve the service.

End of life care and support

- People were supported to make decisions about their preferences for end of life care.
- Staff knew to respect people's religious beliefs and preferences.

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.

This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- Not all notifications of significant events were submitted to CQC in a timely manner. This is being looked at outside of the inspection process.
- The registered manager had failed to complete annual appraisals with staff, record checks on staff competencies and ensure all 'as and when' required medication had a protocol for administration in place. The registered manager took action to address these gaps during the inspection. No impact to people was found as a result of these gaps.
- There was a query over the current registration of the service. This is being looked at outside of the inspection process.
- The culture of the service was open, honest and caring.
- People were treated with respect and in a professional manner.
- Regular checks ensured people were safe and happy with the service they received.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- The registered manager demonstrated a commitment to provide person-centred, high-quality care by engaging with everyone using the service and stakeholders.
- Staff and the registered manager involved people and their relatives in day to day discussions about their care.
- There was a skilled staff team who felt able to speak up freely, raise concerns and discuss ideas.
- Staff, people and their relatives had completed a survey of their views. Feedback had been considered to continuously improve the service.
- Staff told us they felt listened to and that the registered manager was approachable. Staff told us they worked as a team to deliver high standards. One member of staff told us, "The best bit about working here is the team. We all want wants best for the people here and work together to achieve that."

Working in partnership with others

- The service had good links with the local community and key organisations, reflecting the needs and preferences of people in its care.