

Apple Tree Care Limited

Apple Tree Care Home

Inspection report

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York
North Yorkshire
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Apple Tree Care Home is a residential care home providing personal care to up to 20 people. The service provides support to older people, some of these people are living with dementia. At the time of our inspection there were 19 people using the service. The care home accommodates people in one adapted building.

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

People felt safe and were protected from avoidable harm. Staff had safeguarding knowledge and the appropriate health and safety checks for the service were in place. People were supported with their medicines safely.

Staff were not always wearing personal protective equipment such as face masks correctly. We recommended the provider considers their approach to ensure infection outbreaks can be effectively managed.

There were enough staff to meet people's needs. Staff felt they had time to spend with people individually. People told us they thought the staff were caring and had time for them.

People received personalised care. Care plans were detailed and reflected people being provided with choice and completing a range of activities.

The service was well led. People spoke highly of the manager and felt they were approachable. Both staff and the manager were aware of their responsibilities and demonstrated knowledge of their role.

The quality assurance systems were effective and had improved since the last inspection. The provider had an action plan in place to drive continuous improvements within the service.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

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

Rating at last inspection

The last rating for this service was good, published (October 2019). At our last inspection we recommended the provider review the quality assurance system in line with best practice. At this inspection we found the provider had made the required improvements.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook this focused inspection in relation to the Key Questions; Safe and Well-led. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Apple Tree Care Home on our 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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Apple Tree Care Home

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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

One inspector completed the inspection with the support of an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Apple Tree Care Home 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. Apple Tree Care Home is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was not a registered manager in post. The manager in position had begun the application to become registered with CQC.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We used information gathered as part of monitoring activity that took place on 22 June 2022 to help plan the inspection and inform our judgements. 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 visited the service and completed a visual inspection. We reviewed documentation relating to 5 people's care and support needs. We looked at a range of documents relating to the health and safety of the service, including safe staff recruitment. We spoke with 11 relatives and 5 people who use the service. We also spoke with 7 staff, including the manager, senior carers, carer and administrative staff.

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. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks to people were well mitigated by staff. People we spoke with told us they felt safe.
- Care plans and risk assessments were detailed and personalised, they gave staff clear instructions on how to manage risk. Staff demonstrated knowledge of health risks associated to specific people, for example, how to manage diabetes.
- The environment had been well maintained and equipment had been regularly serviced to ensure it was safe to use. The provider was in the process of updating their fire system and fire doors following the outcome of a recent fire safety audit.
- People's personal emergency evacuation plans (PEEPs) had not been kept up to date but this was immediately addressed during the inspection.

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

- We found the provider was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Systems and processes to safeguard people from the risk of abuse

- People were safe and protected from avoidable harm.
- Staff demonstrated their knowledge of abuse and how they would protect people. Referrals had been made to the local authority safeguarding team appropriately and in a timely manner.

Staffing and recruitment

- There were sufficient staff to meet people's needs.
- Staff told us they felt there was enough staff in order for them to have quality time with people. We observed positive interactions between people and staff and there was a relaxed atmosphere in the home. A person we spoke with said, "They (staff) all seem to have time for me."
- Staff had been recruited safely and the appropriate checks had been completed. However, not all

documentation relating to staff recruitment was readily available. During the inspection, the provider implemented additional recruitment checklists for quality assurance.

Using medicines safely

- People received support to take their prescribed medicines safely.
- Staff received training and their competency was checked to make sure they understood how to safely administer medicines.
- Management completed regular audits of how medicines were received, stored, recorded and administered. Any issues identified were investigated and addressed to help make sure medicines were managed and administered safely.

Preventing and controlling infection

- We could not be fully assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- During the inspection, various members of staff were observed not wearing their personal protective equipment (PPE) correctly. For example, masks being worn below noses. The manager was actively working with staff to improve their awareness of practice of PPE.

We recommended the provider considers their approach to ensure infection outbreaks can be effectively managed.

- The service was clean and well maintained. People and their relatives we spoke with consistently told us they were impressed by the standard of cleaning at the service.

Learning lessons when things go wrong

- People received timely care and support if they were involved in an accident or incident. Staff responded to report any issues and helped people to seek medical attention if needed.
- Staff had been made aware of any incidents or accidents and they were discussed in an open forum to encourage staff to reflect on how incidents could be prevented from re-occurring.
- Relatives we spoke with consistently told us they were impressed by the manager and staff team's response to incidents. One relative told us about an incident which had occurred and commented, "The safeguarding was done quickly, yes I think they addressed that issue fast."

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.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People and relatives praised the provider for their person-centred approach and felt the service was very well led. Comments included, "It is a home from home" and "I could not thank them (staff) enough here, they (staff) spend a lot of time with them (person) and we love the pics they (staff) send."
- People's care plans reflected their desires, dislikes and preferences. Staff we spoke with gave examples of person-centred care with detail, such as how people preferred their bath or how they liked hot drinks to be served.
- People were encouraged to maintain their family relationships and access the community. One relative told us, "If we're concerned about them getting a bit low, they (staff) will always let me know, we have an open dialogue about [person]. They are quite solitary, their interests were more outdoors but they can't do that now. However, they get them out each week and they got them a daily newspaper which they like."

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

At our last inspection we recommended the provider reviews the quality assurance system in line with best practice. At this inspection we found the provider had made the required improvements.

- The provider has clear and effective governance, management and accountability arrangements. Staff understand their role and responsibilities, are motivated, and have confidence in their manager.
- Effective quality assurance systems were in place which had identified areas of improvement and development for the service. The manager had an active action plan which appeared effective in ensuring issues were addressed efficiently; any issues raised at the inspection had already been identified.
- Care plans and risk assessments were in place which guided staff to meet people's needs. However, staff told us they required further training on the new computer system to ensure staff worked consistently from the same records.
- People praised the manager. Staff and relatives also talked positively of the manager. Comments included, "The new manager is really good, very professional and caring at the same time" and "I feel like I could go to them about anything."

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 provider demonstrated their knowledge of the duty of candour. There had been no instances where this had needed to be exercised.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The provider had regular reviews of people's care and support. These were done in collaboration with relevant professionals and family members.
- People had been referred to the appropriate healthcare services, such as GP and specialist teams in a timely manner.
- Relatives we spoke with consistently told us they felt involved and engaged. Relatives informed us there were regular meetings for them to attend, and various other forums such as social media groups.
- Staff told us they felt supported and that their voice was valued. Staff meeting minutes evidenced an open forum for staff to participate and have their opinion.

Continuous learning and improving care

- The provider defines quality from the perspective of the people using it. The manager had recently completed reviews with each person and their family or advocate and used this as an opportunity to gain feedback of the service.
- Staff were invited to be innovative in their approach and staff meeting minutes demonstrated staff were well informed of the importance of change and what needed addressing. For example, staff were aware of the outcome of a recent fire safety audit and what work was required.