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Tree Tops Residential Home

Inspection report

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13 June 2018

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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

This unannounced comprehensive inspection took place on 11 and 13 June 2018.

Tree Tops Residential home is located in a residential area of Rainhill within walking distance of a train station. The service provides residential care without nursing for up to 43 people. People living in the home may be living with dementia. At the time of the inspection there were 41 people living in the home. The home comprises of two units; the Tree Tops unit accommodated 28 people and Delphland unit accommodated 13 people living with dementia.

People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided and we reviewed both areas during this inspection.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

The service had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Risks to people were assessed and measures put in place to manage identified risks and reduce the likelihood of harm occurring.

Staff had received training in relation to safeguarding adults from abuse and understood what actions they should take when concerns are identified.

Safe recruitment processes were in place to ensure that newly recruited staff were safe to work with vulnerable adults.

Medicines were managed and stored safely and people received medicines at the right times.

People received care and support from staff who received appropriate training and supervision for their role.

Consent was gained in accordance with the Mental Capacity Act 2005 (MCA); staff understood the need to obtain consent from people prior to offering support.

People's dietary needs were understood and met and people were provided with food and drink

appropriate to their needs.

People were supported with access to other health and social care professionals; care records showed evidence of additional support from GPs, opticians, district nurses and social workers.

People were treated with dignity and respect; staff ensured privacy was maintained at all times. Interactions between staff and people were positive and staff showed a good knowledge of the people they supported.

People's care and support needs were reviewed regularly and updated where appropriate. Care and support plans were based on individual needs and person centred.

The quality and safety of the service was assessed and monitored regularly and improvements made when required. The management team were open and inclusive and showed a desire to maintain and improve on the quality of the service being provided.

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 ●

This service remains safe.

Is the service effective?

Good ●

This service remains effective.

Is the service caring?

Good ●

This service remains caring.

Is the service responsive?

Good ●

This service remains responsive

Is the service well-led?

Good ●

This service remains well-led.

Tree Tops Residential Home

Detailed findings

Background to this inspection

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

The inspection was a comprehensive inspection which took place on 11 and 13 June 2018. Day one of the inspection was unannounced whilst day two was announced. The inspection team consisted of one adult social care inspector and one expert by experience (ExE). An ExE is a person who has personal experience of using or caring for someone who uses this type of care service.

We checked information that we held about the service and the service provider. This included statutory notifications sent to us by the registered manager about incidents and events that had occurred at the service. A notification is information about incidents and events which the registered provider is required to send to us by law. We used all this information to plan this inspection.

We spoke with five people who used the service and four relatives, three members of care staff, kitchen and maintenance staff, the deputy and registered manager. We reviewed care records for five people who received support. We also reviewed training records, recruitment files for four members of staff, medicine administration records and other records relevant to the quality monitoring of the service.

Is the service safe?

Our findings

People told us they felt safe living in Tree Tops and had no concerns about how they were treated. Comments included "Very safe", "There's no aggression here and there's always staff on duty", "I know I'm safe here, we look after each other" and ""Yes I'm safe".

Risks that people faced were assessed and managed appropriately. Care plans included risk assessments and support plans with guidance for staff on how to reduce the risks and keep people safe from harm. Plans were reviewed regularly and updated when required so that staff had current information and guidance about how to keep people safe.

Each person living in Tree Tops had a personal emergency evacuation plan (PEEP) that provided detailed guidance for staff on how to safely evacuate people during an emergency such as a fire outbreak.

Staff had received training in relation to safeguarding and showed a good understanding of how to recognise and report abuse. Staff had access to policies and procedures in relation to safeguarding and relevant guidance to assist them in reporting incidents both internally and externally if required.

Staff had completed medication training and regular checks were in place to ensure that correct procedures were being followed in relation to safe administration and documentation. People's medication was stored securely in a locked trolley which, when not in use, was stored in a locked treatment room. Medication administration records (MARs) were correctly completed when required. PRN (as required) protocols were in place for people who only required medications to be administered when needed.

Sufficient numbers of suitably qualified and experience staff had been deployed to meet the needs of people living in the home. This was seen through observations made during the inspection and from staffing rota's provided by the registered manager.

Safe recruitment processes were being followed in line with the provider's recruitment policy and procedures. This included obtaining information about applicant's previous work history, qualifications, experience and checks on their criminal background.

Staff had completed training in areas such as health and safety, first aid, fire safety and infection control and showed a knowledge and understanding of how to respond to emergencies. Regular safety checks were completed to ensure the home remained safe for people living there. Checks were completed on the environment, systems and equipment used within the service; this included gas safety checks, electrical systems and appliance checks, fire alarms and fire drills.

Is the service effective?

Our findings

People told us they felt staff provided them with the right care and support. Comments included "[Staff] always seem to know what they are doing" and "[Staff] look after me well, I have no complaints".

Staff were required to complete a detailed induction on commencement of their employment at Tree Tops and received on-going regular training appropriate to their roles. Training was complete in areas such as manual handling, food hygiene, dealing with death and dying, dementia care, Mental Capacity Act 2005 and Deprivation of Liberty Safeguards and nutritional needs. Records and discussions with staff showed evidence they were supported in their role through regular supervision and appraisals; this provided them with the opportunity to discuss their own learning and development needs and any issues or concerns they may have.

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 make particular decisions, any made on their behalf must be in their best interest and as least restrictive as possible. People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). Applications to deprive people of their liberty had been made regularly to the local authority and in accordance with correct procedures. Consent for care was gained in accordance with the principles of the MCA. Staff understood the importance of gaining consent from people before offering care and support; this was observed during inspection.

People were supported with their nutritional needs and were provided with a healthy balanced diet suitable to their needs, likes and dislikes. Both care staff and kitchen staff had knowledge of those people with specific dietary requirements and ensured the diet they received was specific to their needs.

People were supported to access health and social care professionals; care records showed evidence of people being supported with routine health appointments where needed. Care staff were proactive in referring people for appropriate support from external health and social care professionals and care records detailed any action required.

People's needs had mostly been met by adaptation, design and decoration and steps had been taken to ensure the environment supported people living with dementia; such as appropriate lighting, colour schemes, clear signage and pictorial boards. The registered manager told us they were currently making further improvements to the Delphlands Unit to make this a more 'dementia friendly' environment.

Is the service caring?

Our findings

People receiving support and relatives we spoke with were extremely complimentary about the quality of care provided by staff. Comments included "[Staff] are lovely", "Nothing is too much trouble for [staff]", "You can have a laugh and a joke with [staff]", "[Staff] look after us very well" and "I love the [staff]."

Many of the staff had worked at the service for a number of years; it was clear when speaking with staff and observing their actions that they knew people well and had good positive relationships with them. Staff knew people's likes, dislikes, wishes and preferences.

People told us and observations confirmed, that staff maintained people's privacy and dignity. Staff were observed knocking on people's doors before entering and ensured that doors remained closed when providing support or discussing private matters. Staff were able to clearly explain the actions they take to ensure that people's dignity and privacy were maintained at all times, especially whilst providing personal care.

People were supported to maintain relationships which were important to them such as with friends and family. People appeared relaxed around staff and there was a lot of laughter and banter between them and other people living in the home.

Staff supported people to be as independent as possible and offered choices about the care and support they provided. People told us staff did their best to promote independence and confirmed they were offered choices about their care.

The registered manager showed an understanding of their roles and responsibilities in relation to people's equality, diversity and human rights needs and requirements. The registered manager told us there were a number of people who were visited regularly by members of the local churches; the local catholic church visited every Friday in order to perform Holy Communion and another local church visited once a month.

Is the service responsive?

Our findings

People told us staff were quick to respond to requests for support and from observations made, staff were seen to respond promptly to requests made. Comments included "[Staff] are very quick if I want something from my room" and "I don't seem to wait long for staff to come if I need anything".

Tree Tops ensured that people received personalised care that met their needs. Each file contained an assessment of people's care needs. Support plans and assessments were reviewed regularly and updated where required. Those looked at contained detailed information to help staff provide care that reflected people's individual needs. Care plans also contained information to help staff get to know the people they were supporting, such as people's life histories, likes and dislikes and information regarding their family.

Activities were provided on a regular basis. This included group and one-to-one activities. The registered manager also arranged for groups and external entertainers to visit on a regular basis to provide a variety of activities. The local nursery visited weekly and carried out arts and crafts with people. On the day of our inspection a group of nursery children attended; people were extremely positive about their visit and appeared to enjoy the activity. Other groups such as a school choir, pet therapy and the 'Healthy Living Team' team visited on a regular basis. In addition to activities within the home, people were taken on trips out such as Knowsley safari park, Blackpool and a local hotel for themed events.

The registered provider had a complaints procedure which was made available to people and their relatives. A record was kept of any complaints made and how they had been dealt with. The complaints that had been received had been dealt with effectively and in an appropriate time scale. People told us they had no complaints about the service but if they did they would not be afraid of raising them with staff.

Is the service well-led?

Our findings

People receiving support spoke positively about the management team with comments like "[Manager] does a good job", "[Managers] are always on the go" and "[Managers] are so kind". The atmosphere within the home was relaxed, friendly and inclusive. This was demonstrated through observations and discussions with people and staff.

The registered manager was supported in their role by a deputy manager. Both registered manager and deputy manager worked well to ensure they delivered a quality service to people living in the home. Both managers showed a clear desire to improve the service being provided and ensured that their vision and values were shared with all staff. Both the registered manager and deputy manager operated an on-call service so that staff could contact them for advice, guidance or support outside of their working hours.

The quality and safety of the service was regularly checked. Checks were carried on a regular basis on all aspects of the service such as care plans, health and safety of the environment and equipment, medication management and staff performance.

The registered manager maintained good working relationships with outside organisations such as schools, nurseries, local churches and health and social care organisations; for instance GPs and social workers. The local high school had recognised the work of the service and had recently invited the managers to deliver a presentation to school children on the subject of health and social care.

Registered providers are required by law to inform CQC of important events that happen at the service. The registered manager had notified when significant incidents/events had occurred at the service since the last inspection.

The registered provider had displayed their ratings from the previous inspection in line with Health and Social Care Act 2008 (Regulated Activities) Regulations 2014; Regulation 20A.