

Maple Tree Care Limited

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Inspection report

3 Epsom Gardens
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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

About the service

Maple Tree Care Limited is a residential care home providing accommodation and personal care to up to 4 people. The service provides support to people with learning disabilities and autistic people. At the time of our inspection there were 3 people using the service.

People's experience of the service and what we found:

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessment and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support

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. People were supported to access the community and experience meaningful activities in line with their need and wishes. The home was visibly clean and person centred. The director and Registered manager were committed to the continuous improvement of the service.

Right Care

Relatives commented positively about the care provided by staff. People were supported by staff who knew them well. People received care that was personalised and responsive to their needs. Medicines were managed safely.

Right Culture

People, staff, and Families were involved in the running of the home, the registered manager worked in partnership with others to achieve outcomes for people. There was positive and open culture in the home.

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

The service was registered with us on 28 October 2022 and this is the first inspection.

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well led.

Details are in our well led findings below.

Maple Tree Care 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 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 1 inspector.

Maple Tree Care Limited 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. Maple Tree Care Limited 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 provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was unannounced.

What we did before the inspection

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.

During the inspection

We spoke with 1 person who used the service and 1 relative. We gained feedback positive feedback from 1 professional supporting the service. We observed staff engaging with people in communal areas and the care people received. We spoke with 2 members of staff and the registered manager. We reviewed a range of records including 2 people's care plans, medicines records and a variety of records relating to the management of the service including audits, staff files and policies and procedures.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. This is the first inspection of this newly registered service. This key question has been rated Good.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- Staff we spoke with had received Safeguarding training and knew what action to take to keep people safe.
- The provider had a whistle blowing policy in place and staff had access and knew how to follow and understood the policy.

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

- The provider learned lessons when things had gone wrong.
- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- Environmental and equipment checks were completed regularly to ensure the premises and equipment were safe.
- Risk assessments were individual to people's needs. These were reviewed regularly to ensure accuracy and for staff to have a clear and up to date guidelines to support people.
- Personal Emergency Evacuation Plans (PEEPS) were in place, they were informative and gave staff clear guidance in the event of an emergency.
- Accidents and incidents were analysed by the provider to look for trends and themes and any lessons learnt were shared with staff through team meetings.

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- The provider operated safe recruitment processes. This included obtaining references and carrying out a Disclosure and Barring Service (DBS) check. Disclosure and Barring Service checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were enough staff to support people, we observed meaningful activities supported by staff. One staff member told us "Staff levels are really good, if there is sickness then the registered manager or director will cover and work with us".
- Relatives felt there was enough staff, one relative said, "There is always plenty of staff when we visit and always someone available to talk to".

Using medicines safely

- People were supported to receive their medicines safely.
- Medicines were stored safely.
- Staff received training and regular competency assessments in medicine management. One staff member said, "I feel confident in administering medication".
- People's medication administration records (MAR) displayed their photo. This helped to ensure staff

administer the correct individual's medication.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- The environment was clean and freshly decorated.
- We were assured the provider was using PPE effectively and safely. Staff were observed using correct and suitable PPE.
- We were assured that the provider was preventing visitors from catch and spreading infections.

Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

The provider was working in line with the Mental Capacity Act.

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.

This is the first inspection of this newly registered service. This key question has been rated Good.

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

- People's needs were assessed and care and support was delivered in line with current standards to achieve effective outcomes.
- Care plans reflected people's needs and wishes and were amended when changes occurred in people's lives, however we found that long term aspirations were not always fully explored. We spoke with the manager and we were assured that the goal planning process was being reviewed.
- Staff interactions showed they knew people well and how they liked to be supported.

Staff support: induction, training, skills and experience

- The service made sure staff had the skills, knowledge and experience to deliver effective care and support.
- Staff received training and an induction. One staff member said, "I had a 2-week induction which I felt was enough, we could have longer if we felt we weren't ready."
- On-call support was available to staff by the director and the registered manager, staff said they could ring them at any time.
- Staff felt supported by the management team, one staff member said, "I don't think staff morale has ever been low whilst I have been here, I feel valued and supported."

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

- People were supported to eat and drink enough to maintain a balanced diet.
- People were offered drinks regularly, we observed this throughout the inspection. People were encouraged to make drinks independently with staff support where needed.
- People's nutritional and hydration needs were met, staff were knowledgeable of people's preferences.
- Health professionals were involved in supporting some people living in the service to manage their weight. This helped staff to understand healthy eating and choices.

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

- People were supported to live healthier lives, access healthcare services and support.
- The provider ensured the service worked effectively within and across organisations to deliver effective care, support and treatment.
- Staff worked with a variety of external professionals, this ensured people experienced positive outcomes in their health needs.
- People were supported to attend regular health appointments; we saw evidence of this when looking at individuals' health appointment logs.

A healthcare professional told us, "I have always been impressed with the response I receive from the home. They are helpful, polite, and very informative. The manager is very responsive and appears to know her

residents and team well. She will also always make herself available."

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

People's individual needs were met by the adaption, design and decoration of the premises.

- Peoples' bedrooms were personalised; one person's bedroom had a solar system theme which was chosen by the person.
- The environment was adapted with handrails and all communal rooms were accessible.
- People had their own individual sheds in the garden where they were able to spend time completing activities of their choice.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

- The provider was working in line with the Mental Capacity Act.
- Mental capacity assessments were in place and reviewed regularly.
- Staff understood the importance of gaining consent. Staff gave people choices about their day to day lives and decisions.
- Where people lacked capacity to make decisions about areas such as healthcare, professionals and relatives were involved to ensure decision were made in peoples' best interest.
- Where people were subject to DoLS authorisation, they were applied for appropriately. Clear records were in place to show when authorisations were due and or when awaiting authorisations there was a log of contact made.

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.

This is the first inspection of this newly registered service. This key question has been rated Good.

Ensuring people are well treated and supported; respecting equality and diversity

- People were well supported.
- Staff were caring, positive and respectful towards people, we observed staff laughing with people and enjoying each other company.
- A relative said "Staff are very friendly and kind."
- One person was able to show me their shed and activities they were interested in. This person said, "I like living here, they (Staff) are nice to me".

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

- People were supported to express their views and make decisions about their care.
- Staff supported people to maintain relationships with people who were important to them.
- Records showed that people were able to express their views and wishes through key worker meetings.

Respecting and promoting people's privacy, dignity, and independence

- People's privacy, dignity and independence were respected and promoted.
- We observed staff maintaining people's dignity by closing doors when supporting with personal care and knocking on doors before entering.

Independence was promoted in the service, one person enjoyed hoovering, staff supported them to complete this.

Is the service responsive?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated Good.

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

Meeting people's communication needs

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

- The provider was meeting the Accessible Information Information.
- People's communication needs were understood and supported.
- People were supported as individuals, in line with their needs and preferences.
- Systems were in place to support goal planning; however, we were unable to find clear evidence of people's goals and aspirations. We spoke with the registered manager who assured us that they would be using this system more effectively in the future.
- Staff offered choices that were tailored to peoples' individual communication needs.
- We observed staff using person-centred communication methods with all people living in the service.
- Staff engaged in meaningful activities; we observed one person making small figures of animals as they enjoyed visiting animals at the zoo. Staff were observed engaging positively and showing an interest in the activity.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to maintain relationships, follow their interests and take part in activities that were relevant to them.
- Staff had built trusting relationships with families and people living in the service. One relative said "They (staff) are always updating us of what activities (name) has been doing."
- People were supported to participate in social activities that they had chosen, staff had made adjustments to ensure people were able experience them.

Improving care quality in response to complaints or concerns

- People's concerns and complaints were listened to, responded to and used to improve the quality of care.
- Relatives told us they knew the procedure on how to make a complaint but had not needed to, one relative said, "If I have any concerns, I will raise them with the registered manager or director."
- Systems were in place and clear on how to manage complaints or concerns. The registered manager understood the process and was open and transparent in managing concerns and complaints.

End of life care and support

- People were supported at the end of their life to have a comfortable, dignified and pain free death.
- At the time of the inspection there were no people being supported with end-of-life care.
- End of life care plans were not in place during the inspection, we spoke with the registered manager who assured us that they were working with people and families to gain information to commence these plans.

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 is the first inspection of this newly registered service. This key question has been rated Good.

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

- There was a positive and open culture at the service.
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- People were observed to be happy within the service, one relative said "(name) is much calmer now and they have settled in quickly. Staff seem happy in their roles, there is not a high turnover of staff."
- Staff felt supported by the registered manager and director, one staff member said "I am really happy working here and find it very rewarding, the registered manager is very approachable."

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 understood their responsibilities under the duty of candour.
- The registered manager understood their responsibilities under duty of candour and to be open and transparent.
- The registered manager understood when and what statutory notifications should be sent to us legally.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- The registered manager had oversight of audits completed in various areas to monitor the quality of the service. There were clear governance systems in place that ensure clear and effective oversight.
- The registered manager and staff were clear on the expectations of their job roles.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.
- Feedback was gained from people during keyworker meetings and reviews. This supported people to communicate their views in a person-centred format.
- Relatives were sent formal surveys; these could be anonymous if they wished. One relative said, "we have received a survey and feel our suggestions are listened to and acted on."
- Staff meetings were held regularly, and staff felt they could share their views.

Continuous learning and improving care and working in partnership with others

- The provider worked in partnership with others.
- The provider had created a learning culture at the service which improved the care people received.
- The registered manager had signed up to and been attending registered manager meetings with the local authority for current guidance and information.
- The registered manager and staff listened and acted on feedback from external professionals.
- Records were in place and showed clear details of appointments and actions, therefore ensuring positive outcomes for people living in the service.