

Yew House Limited

Yew Tree Cottage

Inspection report

15-17 Padlock Road
West Wrating
Cambridge
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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?

Outstanding ☆

Is the service well-led?

Good ●

Summary of findings

Overall summary

Yew Tree Cottage is a residential care home providing personal care for up to 11 people with a learning disability. At the time of this inspection 10 people were living there. This service also provides care and support to people living in a 'supported living' setting in one house and annexe (shared by five people). At the time of the inspection they were providing personal care support to one person.

The service was a large home, bigger than most domestic style properties. It was registered for the support of up to 11 people. This is larger than current best practice guidance. However, the size of the service having a negative impact on people was mitigated by the building design fitting into the residential area and the other large domestic homes of a similar size. There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home. Staff were also discouraged from wearing anything that suggested they were care staff when coming and going with people.

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

The registered manager, management team and staff working in the service were all very dedicated to providing care and support to people in an individual and meaningful way. Staff knew people's needs in detail including, their likes and dislikes and their goals for the future, which they helped them to achieve. People were encouraged and supported to take part in work, voluntary and social activities that they enjoyed. Staff were kind, caring and promoted people's privacy and independence where possible.

People felt safe and were protected from avoidable harm by a staff team trained to recognise and report any concerns. Risks to people's health and safety were identified and safely managed. Staffing levels were appropriate to meet people's needs in a timely manner. People received their medication as prescribed. There were systems in place to record, monitor and learn from accidents and incidents. People lived in a clean, hygienic environment.

Staff had the knowledge, skills and support they required to meet people's needs effectively. People's physical, emotional and social needs were identified so staff could meet these. People received support with eating and drinking when needed. People were supported to maintain good health and were supported by or referred to the relevant healthcare professionals.

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.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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 (report published August 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Is the service effective?

Good ●

The service was effective.

Is the service caring?

Good ●

The service was caring.

Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Is the service well-led?

Good ●

The service was well-led.

Yew Tree Cottage

Detailed findings

Background to this 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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Yew Tree Cottage is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

This service also provides care and support to people living in a 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

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

We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We also looked at notifications the service sent us about events that had happened in the home.

We used all of this information to plan our inspection.

During the inspection-

We spoke with five people who used the service about their experience of the care provided. We spoke with five members of staff including the registered manager, care manager, deputy manager and two care workers.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff knew how to recognise abuse and reduce the risk of people suffering abuse. Staff had received training and had a good understanding of the provider's safeguarding systems and procedures. They were confident the management team would address any concerns and make the required referrals to the local authority. The registered manager was also aware of their responsibilities for reporting concerns to the CQC.
- All of the people we spoke with told us they felt safe living at Yew Tree Cottage. One person told us, "I feel safe here because I'm happy."
- Information was available for people and for staff on adult safeguarding and how to raise concerns. The staff had discussed how to stay safe with people in "house meetings" and discussed different scenarios and what people could do if they didn't feel safe.

Assessing risk, safety monitoring and management

- Processes were in place to protect people from avoidable harm. Risk assessments were completed to identify risks to people's health and safety such as the risk of them travelling on public transport alone. Staff completed risk assessments in way that didn't stop people from taking part in activities that they enjoyed but risks were reduced where possible.
- The environment and equipment were safe and well maintained. Emergency plans were in place to ensure people were supported appropriately in the event of a fire.

Staffing and recruitment

- People we spoke with told us that they felt that there were enough staff available. Staff confirmed that they had time to support people with personal care and activities at a pace that suited the person. If people wanted to go out at a particular time the staff rota was changed to ensure there was enough staff available.
- Safe recruitment practices were in place to ensure staff were safe to work with vulnerable people.

Using medicines safely

- People's medicines were managed safely. Processes were in place for the timely ordering and supply of medicines.
- Staff completed training to administer medicines and their competency was checked regularly.

Preventing and controlling infection

- The service was clean, tidy and free of unpleasant odours.
- Staff had completed training in how to reduce the risk of infection and followed good practice guidance.

Learning lessons when things go wrong

- Staff followed the provider's procedures when any accidents or incidents occurred. This included completing forms the registered manager reviewed to look for any potential patterns and prevent recurrence.
- The registered manager stated that as there had not been many accidents it was not possible to look for themes. However, each accident had been shared with the staff and lessons learnt about how they could prevent a reoccurrence.

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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- Staff assessed and documented people's physical, mental and social needs and preferences in relation to their care and they planned care based on this.
- People's care and support was regularly reviewed to ensure they were provided with the right care and support in line with best practice and guidance.

Staff support: induction, training, skills and experience

- Staff had received training when they first started working at the service and this was updated each year. Staff told us, "I always get asked in supervisions if I would like more training. They [the provider] are really good at giving me the backing and support I need to carry out my role."
- Staff told us they continued to feel supported, received regular supervision on a one to one basis, and had an annual appraisal.

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

- People were supported to purchase, prepare and eat food and drink that they enjoyed and helped them to maintain a healthy lifestyle.
- Staff took time to give people the support they needed so that when appropriate people could prepare their own food. For example, we saw a staff member holding a large bowl of soup so the person could ladle out exactly how much they wanted into another bowl before heating it up.

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

- Staff supported people to attend appointments with health professionals such as GPs, dentists, chiropodist, opticians and hospital consultants.
- Staff liaised with other agencies such as daycentres to ensure consistent support was provided to people.

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

- People could choose how they wanted their bedrooms to be decorated. One person told us, "It's really good to live here, I love my bedroom, I chose the colour."
- Although there was a shared bedroom the two people chose to share the room and this was kept under constant review to ensure they were both happy to share.

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 when this is in their best interests and legally authorised under the MCA. 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff obtained consent for people's care and support where possible. Staff had a good understanding of the principles of the MCA and people were supported wherever possible to make their own decisions.
- When people could not make a decision, staff completed a mental capacity assessment and the best interest decision making process was followed and documented. Staff tried to ensure that any action taken was done in the least restrictive way possible. DoLS applications had been made when required.

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant 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

- Staff supported people in a compassionate and understanding manner. We saw when staff interacted with people they did so in a respectful, encouraging and dignified way.
- The atmosphere in the service was friendly and inclusive. One member of staff described the time when people returned from day placements and work as like "the hustle and bustle of a family" and that was exactly what it sounded like. People were pleased to see each other and the staff and talked to them about how their day had been.
- Staff had a good understanding of the people they supported. Staff took time to get to know people's likes and dislikes, their pasts and interests and incorporated these into their care.
- People told us that they thought the staff were kind and caring. One person told us, "It's really good to live here, the staff are kind." Another person also told us, "The staff are kind."

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

- Staff strived to involve people in making decisions about their care and how the service was run. Each person had a keyworker and they had regular meetings to see if they were happy with the service being provided and if they needed any extra support. Staff took the role of keyworker very seriously. One staff member told us how they provided extra support by ensuring they kept in contact with their key person's family and also supported them to purchase any shopping they needed.
- People were involved in the writing of and reviewing of their care plans. This meant that they could include information that was important to them. People told us they were always involved in any decisions about their care.

Respecting and promoting people's privacy, dignity and independence

- The registered manager and the staff promoted people's privacy, dignity and independence. People were encouraged to set goals for the future and then staff supported them to reach their goals step by step. For example, one person when they moved into Yew Tree Cottage had never travelled alone on public transport. Staff had supported them by accompanying them and teaching them the skills they needed so they could travel on public transport independently.
- People told us staff were good at promoting their privacy and dignity, particularly when supporting them with any personal care. Staff told us it was always important that they supported people with personal care in private.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has improved to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- People received care and support truly centred around their individual needs and preferences. People's support plans were detailed and included what the person was able to do and how staff should support them. The support plans were personal to each person and supported them with their own unique areas of need, in a way that did not stop them enjoying experiences. For example, one person needed support from staff to ensure that their behaviour was always appropriate to the situation they were in. Staff were aware of this and gave the person the reassurance and guidance they needed so they could still enjoy experiences in the community, without placing themselves or others at risk.
- People's likes, dislikes and preferences were completely known and respected, staff were committed to providing personalised care. One member of staff told us the best thing about their job was, "Seeing people fulfilled. As long as they're happy (people who used the service) then I'm happy." They had an excellent understanding of each person's life history and knowledge of their needs from working closely with them. This knowledge had enabled staff to support people in order to improve their lives, with excellent results. For example, one person had wanted to find voluntary work. Staff had worked with the person and voluntary organisations to help them secure a position. The staff then supported the person at the voluntary organisation until they felt secure and happy to work there without staff support. The person told us, "It makes me feel good about myself" when we asked them if they enjoyed their voluntary work.
- In line with registering the right support people had been supported to move on from Yew Tree Cottage to the supported living accommodation also managed by the provider. One person had moved into Yew Tree cottage without any domestic skills or experience or confidence to go out on their own. The registered manager and staff had supported the person to visit the supported living accommodation to ensure they liked it. They also taught them the skills they would need to live more independently and supported them to move. One person had then moved on again to an annexe on their own in the garden of the supported living house and was planning to move out into their own local authority housing. They told us that being able to move from Yew Tree Cottage to Yew Tree House and then the annexe had made them feel proud of what they had achieved and they were excited about the future and that they wouldn't have been able to do it without the support from the staff.

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.

- The registered manager was aware of the accessible communication standards and told us of ways in which the service was meeting people's needs in relation to this. Each person's communication needs had been assessed and recorded in their care plans. This information was then used by staff so that they knew how to communicate with people. For example, the pictures of the staff on duty were put on a notice board. This was used by one person and gave them reassurance so they could see which members of staff were in the service and could check whenever they needed to. All of the staff team were aware if the person was becoming anxious they could use the photo's to explain who would be coming into work. This had helped to reduce the person's anxiety.

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 encouraged and supported by staff to lead a fulfilling life by taking part in activities, attending social events, employment, maintaining relationships and organising holidays that they choose the destination of. People had been supported to purchase electronic tablets that were suitable for them to use so that they could research things such as holiday destinations themselves. Before having the tablets they relied on staff to do this. Staff had identified that one person tended to agree with other people when asked about activities and holiday destinations, so they had taken the time to meet with them on their own to find out what they would like to do without being influenced by others. This had meant they had been able to research and find and book the holiday that they really wanted to go on with the staff support.
- People were supported to use technology in a way that was creative and reduced their reliance upon formal support. For example, following support from staff one person was able to use their tablet to research social activities in the community and independently arrange to take part in these. This had empowered the person to have greater control over how they spent their time and had resulted in them developing increased self confidence.
- People told us they could choose how they would like to spend their time. One person had told staff they would like to learn how to knit. So, a member of staff had taken the time to learn to knit so they could teach and support the person. As well as learning a hobby it had also been used successfully as a strategy to help distract the person when they were feeling anxious.
- People were supported to celebrate religious festivals that were important to them. People chose if and when they wanted to attend religious services and support was given if needed to attend.

Improving care quality in response to complaints or concerns

- The complaint procedure was displayed. There had not been any complaints received since the previous inspection although people told us they knew how to raise concerns if needed.

End of life care and support

- The deputy manager showed us the end of life care plan that they had been working on with people who use the service. It was presented in writing and pictures to make it easier for people to understand and talk about. Where appropriate people's families had also been asked to contribute as well.

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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- The service had developed a personalised approach which was driven by management and understood by people and staff. People who used the service were put at the centre of any decision making about how the service was run. Staff confirmed that they knew people well and cared and supported them as individuals. Staff were motivated in their roles.
- The management team were approachable to both people using the services and the staff team. We saw many examples of when people came to speak to the staff and registered manager and reassurance was given when needed.

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

- There was an effective quality assurance process in place. Regular audits to check the quality of care were conducted and when needed improvements were made in a timely manner.
- People and staff were complimentary about the support they received from the management team.
- The registered manager was clear about their responsibilities about what they needed to report to the Care Quality Commission (CQC). Risks were clearly identified and escalated where necessary.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Regular meetings were held with staff and people. This meant that people and staff could contribute their ideas and discuss their preferences.
- People who lived at Yew Tree Cottage and those who used the supporting living service were involved in the recruitment for new staff. They met and interviewed prospective staff and gave feedback to the registered manager about if they thought the candidate was appropriate or not.
- People and staff were encouraged to contribute their views on an ongoing basis informally and through surveys. Staff met with people regularly to ask about their experiences and to see if they would like anything done differently. Surveys were also sent out to people's families and healthcare professionals to ask for feedback on the service and to request any ideas for improvements.

Working in partnership with others

- The registered manager and staff achieved good outcomes for people by working well with health care

professionals.

- There were strong links with the local community with people attending social and religious events, using public facilities such as the library and shops and supporting local sports team.