

Mrs Ann Devers

# Cherry Tree House Residential Care Home

## Inspection report

119, Monkleigh Road, Mordon, Surrey SM4 4EL

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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 

### Overall summary

This was an unannounced inspection which took place on 15 and 21 May 2015. At our previous visit in November 2013, we judged that the service was meeting all the regulations that we looked at.

Cherry Tree House is a service in the Merton area, providing personal care and support for three elderly people.

The service has a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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 the associated Regulations about how a service is run.

Relatives of people told us they felt their family members were safe living at Cherry Tree House. The registered manager knew how to protect people if they suspected they were at risk of abuse or harm. Risks to people's

# Summary of findings

health, safety and wellbeing had been assessed and the registered manager knew how to minimise and manage identified hazards in order to keep people safe from harm or injury.

The registered manager and the owner told us they provided the care and support for the people living at Cherry Tree House together with another member of staff who works on one day each week. We found there were enough trained and supported staff to meet people's needs. Relatives told us staff knew people's needs well and their choices and preferences about their care.

People received their medicines as prescribed and staff knew how to manage medicines safely.

Relatives told us staff were kind and caring, and our observations and discussions with staff supported this. We saw they treated people with dignity, respect and compassion.

People had a varied and nutritious diet and choice of meals.

Staff supported people to keep healthy and well through regular monitoring of their general health and wellbeing.

People were encouraged to maintain relationships that were important to them. There were no restrictions on when people could visit the home and family members and other visitors told us they were made welcome.

People had access to their local community if they wanted to go out and could choose what they wanted to do in terms of social activities. We saw staff encouraged and supported people to be as independent as they could and wanted to be.

Care plans were in place which reflected people's specific needs and their individual choices. Relatives of people were involved in developing and regularly reviewing their relations' care plans and we saw people were supported to make decisions about their care and support.

People using the service and their relatives were encouraged to give feedback on the service as there was an effective complaints system in place.

Relatives said they thought the registered manager encouraged feedback and sought to develop and improve the service for people.

Staff told us they were clear about their roles and responsibilities. They had a good understanding of the ethos of the service.

Systems were in place to monitor the safety and quality of the service and to get the views of people about the service.

# Summary of findings

## 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. There were safeguarding and whistleblowing procedures in place and staff understood what abuse was and knew how to report it.

Risks were assessed and managed well, with care plans and risk assessments providing clear information and guidance.

There were enough staff to support the people in the home and to meet their individual needs.

The service had effective arrangements for the management of medicines to protect people against the risks associated with the administration of medicines.

Good



### Is the service effective?

The service was effective. Staff were suitably trained and supervised and they were knowledgeable about the support people required and about how they wanted their care to be provided.

Relatives of people said staff sought their consent before providing care.

People were supported to have a varied and balanced diet and food that they enjoyed. They were enabled to eat and drink well and stay healthy.

Good



### Is the service caring?

The service was caring. People were treated with compassion and kindness by staff who understood their needs in a caring and positive way.

Staff worked with people and their relatives to understand people's individual needs so that they could be actively involved in their care and support.

Staff treated people with respect, dignity and compassion, and were friendly, patient and discreet. People and their families were included in making decisions about their care and relatives told us they were made welcome when they visited their relatives living at Cherry Tree House.

Good



### Is the service responsive?

The service was responsive. Care and support was centred on people's individual needs and wishes. Relatives of people were involved in developing and regularly reviewing their relations' care plans. Staff demonstrated a good understanding of people's individual needs and choices.

People, their relatives and friends were encouraged to give feedback about the service they received. There was an appropriate complaints procedure in place which people and relatives were familiar with.

Good



### Is the service well-led?

The service was well-led.

Staff told us they were clear about their roles and responsibilities. Staff had a good understanding of the ethos of the service and therefore provided good quality care for people.

Good



# Summary of findings

Systems were in place to monitor the safety and quality of the service and to get the views of people about the service.

# Cherry Tree House Residential Care 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 was planned to check 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.

This inspection took place on 15 May unannounced and on 21 May 2015 announced.

This inspection was carried out by a single inspector. We reviewed the information we had about the provider prior to our visit and we looked at notifications that the service is legally required to send us about certain events such as serious injuries and deaths.

We gathered information by speaking with two of the people living at Cherry Tree House, two relatives, a social worker, a continence nurse, the registered manager and the proprietor. We observed the provision of care and support to the three people living in the home. We looked at all their care records and all the staff records and reviewed records related to the management of the service.

# Is the service safe?

## Our findings

Relatives said they felt their relations were safely supported by the service at Cherry Tree House. One relative said, "I couldn't be happier. I know they are well looked after, they are safe and they are happy." Another relative said, "It's the best place for [my relation]. They are well looked after and safe." At our inspection we observed a relaxed, friendly atmosphere. We saw that people felt safe with staff.

The service helped people to be protected from abuse. The registered manager told us they had received all the training they needed to carry out their safeguarding roles and responsibilities. They described how they would recognise the signs of potential abuse and what they would do to prevent and report it, if it occurred with the people they supported. The owner knew how they could escalate any concerns they might have. We looked at records that showed what training had been received. We saw certificated evidence for safeguarding adult's training. The registered manager told us if there were any concerns or safeguarding incidents they would report them to the CQC and to the local authority safeguarding teams.

The registered manager showed us a copy of the Pan London safeguarding policy that was available for reference - "Protecting adults at risk; London multi-agency policy and procedures to safeguard adults from abuse". The registered manager was aware how to contact the local authorities safeguarding team if they witnessed or suspected anyone was being harmed or placed at risk of harm. We saw the provider had all the appropriate policies and procedures to help safeguard people, which included; staff whistle blowing, how to make a complaint, and reporting accidents and incidents.

Risks to people were being managed so that people were protected and supported. A care manager told us they had recently reviewed one person's care plan and risk assessment together with the person concerned, their relatives and the registered manager. They told us the risk assessment and care plans were appropriate to meet the person's needs. The care plans we looked at contained individualised risk assessments which identified the hazards people might face. These risk assessments had been drawn up together with the relatives of people and

their care managers. Relatives told us they had been involved in the process. The risk management plans we saw provided detailed guidance about how to support people to keep them safe.

The service had other risk assessments and risk management plans in place to ensure identified risks were minimised so that people were helped to keep safe and staff protected. There was an up to date fire risk assessment, an environmental risk assessment and a monthly health and safety checklist to monitor the identified risks. We saw that the checklist had been maintained regularly.

Relatives said there were enough suitably qualified and experienced staff to keep people safe and to meet their needs. One relative said, "Whenever I visit the registered manager and the owner are always there." Another person said, "I think there are enough staff to help people living there." We looked at the rota and saw there was sufficient staff cover to meet the needs of people. The registered manager told us the owner lived on the premises and the call bell system ensured that people would receive any care or support they might need at night. The registered manager told us they live close by and were also on call should the need arise. They said if the needs of people increased so additional staff support would be provided as required.

Staff files we inspected showed that recruitment checklists had been used appropriately to document all the stages of the recruitment process and to ensure that the necessary steps had been carried out before staff were employed. These included criminal record checks, proof of identity and the right to work in the UK, declarations of fitness to work, suitable references and evidence of relevant qualifications and experience. This showed that the provider had taken appropriate steps to protect people from the risks of being cared for by unfit or unsuitable staff.

People's medicines were managed so that they received them safely. We found that there were appropriate arrangements in place in relation to obtaining, storing, administering and the recording of medicines which helped to ensure they were given to people safely. All the medicines were safely stored away in a locked medicines cabinet. We looked at a random sample of medicine

## Is the service safe?

administration record (MAR) sheets. We saw that staff had maintained these records appropriately and we found no recording errors on any of the MAR sheets that we looked at. People received their medicines as prescribed.

The registered manager told us that they had received medicines training. They told us that Boots is the pharmacy they use and they carry out regular assessments of the provider's procedures to do with the safe administration of

medicines to people. We saw evidence of this confirming what we were told. The registered manager told us they would always consult the pharmacy if they had any concerns about the medicines they received for people. We saw records to show that staff had received medicines training and that there were monthly audits of medicines to help to ensure the safe management of medicines.

# Is the service effective?

## Our findings

Cherry Tree House is a small family run business staffed mainly by the owner and the registered manager. The three people who live at this home have done so for some years. Both the staff and the people knew each other well and this was evident at our inspection. We saw that people received effective care partly because of the family element but also because staff had received appropriate training and supervision and had the knowledge and skills necessary to meet the needs of the people they supported. We looked at staff records and found training information on all the staff files. There was a list of all training that had been completed, together with certificated evidence. The training provided covered the essential areas of knowledge, skills and competencies that the provider had decided staff needed to do their jobs effectively.

We noted that there was additional specific training that could be accessed such as that for the Mental Capacity Act and dementia, all useful additions to the training programme. The registered manager told us all the training was provided by the L.B Merton and access to this training was good. They said the training they had received had helped them with their work.

We saw supervision notes for the staff whose files we inspected and we can confirm they were signed and dated by both the registered manager and the supervisee.

Records showed that staff received regular supervision that they found helpful and supportive to their work. The registered manager told us they provided supervision for the only other member of staff on a regular basis and they were themselves supervised by the owner.

People were able to make decisions about their everyday life and were asked for their consent. It was clear from speaking with relatives that they were actively involved in supporting their family members to make more complex decisions about their care and support needs. Records

showed wherever people were able to do so, they were involved in making decisions about their care and support and their consent was sought and documented. All the people living at Cherry Tree House had the capacity to make decisions about specific aspects of their care and support at the time of this inspection. The registered manager said that people's capacity to make important decisions was always discussed at their care planning meetings so everybody was aware of the person's ability to decide on what was in their best interests. This was corroborated by the care plan meeting minutes we saw.

People were supported to have a healthy and balanced diet. Relatives said they thought people enjoyed the food that was provided for them. One person said, "They get the food they ask for, so they get a choice. They get a varied diet and they seem to enjoy it." Another relative said, "When I am there they seem to be enjoying their meals. I know they get asked what they want to eat, because I've been there at the time they were asked. They seem happy with it all."

A food record was used to record what people had eaten so they could make sure people's meals were varied. We saw from the records that there was a variety of healthy food on offer and that different people had different things to eat at each meal, demonstrating that choices were offered. People's care plans included information about their nutritional needs and preferences. The registered manager said they tried to accommodate people's wishes as well as trying to ensure people had a varied and nutritious diet.

People were supported to maintain good health and have appropriate access to healthcare services. Care files confirmed that all the people were registered with a local GP and had regular annual health checks. People's health care needs were also well documented in their care plans. We could see that all contacts people had with health care professionals such as dentists, chiropodists and care managers was always recorded in their health care plan.



# Is the service caring?

## Our findings

Relatives of people told us that the registered manager and the other staff were very caring of the people living at Cherry Tree House. They said staff worked hard to maintain positive and caring relationships with them. One relative said, "The manager knows them really well, I couldn't be happier, they are really well cared for." Another relative said, "They get excellent care, it's like a family really." A care manager told us they thought the home was excellent and all the people's needs were catered for. They said they thought the registered manager was very caring about the people.

We saw that people were treated with kindness and compassion. Our observations and discussions showed staff to have a good knowledge and understanding of the people they were supporting. Throughout the inspection we observed that people received one to one attention from staff who demonstrated their concern and interest in them. We saw staff patiently spending time supporting people where they needed it, talking to them kindly, explaining when necessary what they were doing or about to do. The registered manager said they really enjoyed their work with people.

People were able to express their views and make decisions about their care and support. Relatives told us staff always listened to what people said they wanted and staff respected their wishes. Relatives said they thought this helped people to feel that they mattered and were understood by staff. The owner and the registered manager were on duty at the time of our inspection and we saw that they interacted with people in a kind, respectful and professional manner.

Because of the family nature of this service and given that people were able to express their preferences with regards to their care and support, the service had developed a good knowledge of people's likes and dislikes. These preferences had been recorded clearly in their care plans.

We saw that people had the privacy they needed and they were treated with dignity and respect at all times. Staff knocked on people's bedroom doors before they went in. We observed that staff asked people what they wanted to eat and what they wanted to watch on television. Relatives told us that staff enabled people to decide for themselves about every aspect of their lives, such as with their personal care and the activities they wanted to do.

Relatives were given appropriate information regarding the care and support their relations received. They told us they had copies of their relative's care plan and they were always invited to care plan reviews so they could represent their relatives appropriately and ensure care and support being given was appropriate.

Relatives said they were always made welcome and there was no bar to them going to see their relative. Staff told us, and records evidenced that people were supported and encouraged to keep in contact with their relatives and friends. We heard how special events, such as birthdays, were celebrated, and families and friends were invited. From our discussions with staff we could see they were welcoming and supportive to relatives who wanted to make a visit.

# Is the service responsive?

## Our findings

People's relatives were very positive about the service and said their family members received appropriate support that met their needs. One relative told us, "It's the best place for my relative; she has blossomed since going to live there." The care manager we spoke with told us that she wished more homes were like this one. She said the registered manager was very caring and responsive to people if they raised any issues with her.

People's needs were assessed together with the local authority social workers and the relatives before they moved into the home and care was planned in response to their needs. Assessments included general health, medicines, hearing and vision, dietary needs, communication, sleep, continence and mental health. People's records included detailed information on their health conditions and backgrounds which enabled staff at the service to support them appropriately.

We looked at people's care plans and saw that each person had appropriate assessments to check whether their needs were changing. This included monitoring of their health conditions. Relatives we spoke with told us that they were always asked for feedback about their family member. One relative told us, "The manager is really supportive and they discuss any concerns or problems that might arise with us."

Each person had a person-centred plan in place, identifying their likes, dislikes and abilities, as well as guidelines for providing care to them in an individual way. Each person had an individualised activity programme, with people doing a range of regular activities according to their preferences.

Relatives of people told us their family member was encouraged to make choices about their lives and about the support they received. They said that where this was not always possible staff would ask relatives to contribute information about people's decisions and choices. One relative said, "I'm in contact with staff all the time. When it's needed the staff will ask me what I think my relative would like." Another relative said staff encouraged their family member to make informed choices about how they lived their lives. Throughout our inspection we saw staff were patient and clear when speaking with people, for example, by giving people time or repeating their answers to ensure they understood what was conveyed to them.

People were supported to pursue social interests and activities that were important to them. Relatives told us staff often arranged interesting social activities for their family members to participate in if they wished. One person told us they loved going into the garden to look at the plants and to have their lunch outside when the weather was sunny and warm. On the day of the inspection they went into the garden and had their lunch just as they wanted. One relative told us that their family member was helped by staff to do the things they loved to do such as shopping and going for a walk in the park. Another relative said, "They go out quite a lot, the manager makes sure they have a good range of activities that they like to do."

The people we spoke with told us they were confident that if they raised a complaint it would be dealt with appropriately. One relative told us, "I have never had to do so but I am sure if I raised an issue it would be dealt with straight away."

During our tour of the premises we were shown a complaints policy and procedure that enabled people and others to make a complaint or a compliment.

# Is the service well-led?

## Our findings

Relatives of people we spoke with told us they were pleased that the registered manager encouraged their involvement with the care and support of their family members and to provide feedback about the service. One person said, “The manager is very caring and supportive, they encourage our feedback.” They told us the registered manager made people feel welcome. One person said, “They care about how the service is run and they ask us for our opinions.”

We found staff were positive in their attitude and seemed to be committed to the support and care of the people who lived at Cherry Tree House. The registered manager told us they encouraged a positive and open culture by being supportive to people and by making themselves approachable with a clear sense of direction for the service. We found this was a fair reflection. We saw the service was forward looking and the registered manager was keen to consider ways people could be provided with improved standards of care and support. One staff member told us, “We are encouraged to discuss any issues and the manager

listens.” Relatives and the care manager we spoke with said they were able to raise issues and make suggestions about the way the service was provided and these were taken seriously and discussed.

Daily handover meetings helped to ensure that staff were always aware of upcoming events, meetings and reviews that were due and this helped to ensure continuity in the service.

Systems were in place to monitor and improve the quality of the service. We saw records to show that the registered manager carried out a monthly audit to assess whether the home was running as it should be. For example the audits included checking whether documents such as people’s hospital passports, support plans and risk assessments were reviewed. We saw an action plan resulted from each monthly audit. Goals from the most recent audit such as taking additional precautionary safety measures in the kitchen had since been actioned.

In 2014 we saw there was a satisfaction survey sent to people and their representatives. The registered manager told us they analysed the responses and prepared an action plan where necessary to address areas that required improvements. The responses we saw were all positive in the feedback that was given.