

## Appletree Court Care Limited

# Appletree Care Home

### Inspection report

158 Burnt Oak Broadway  
Edgware HA8 0AX  
Tel: 020 8381 3843

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### Ratings

#### Overall rating for this service

Good



Is the service safe?

Good



Is the service effective?

Good



### Overall summary

We carried out an unannounced comprehensive inspection of this service on 16 January 2015 at which two breaches of legal requirements were found. The registered provider had not made appropriate Deprivation of Liberty (DoLS) applications for people who lacked capacity to make decisions and we found that there was not a sufficient number of staff available to meet people's needs.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to these breaches.

We undertook a focused inspection on 11 August 2015 to check that they had followed their plan and to confirm that they now met legal requirements.

This report only covers our findings in relation to these topics. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Appletree Care home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Appletree Care Home provides accommodation, nursing and personal care for up to 77 older people, the majority of whom have dementia. The third floor supports people with residential care needs and the first floor and second floor supports people who also have nursing needs. On the day of our visit there were 70 people living in the home.

The home has a registered manager. 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 and associated Regulations about how the service is run.

At our focused inspection on 11 August 2015, we found that the provider had followed their plan and legal requirements had been met.

We found that the provider had employed additional care and nursing staff and staff had been deployed appropriately to meet people's needs.

# Summary of findings

We found that that appropriate DoLS applications had been made for all people using the service who lacked capacity to consent to remaining in the home.

# 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. We found that action had been taken to improve the safety to people who used the service.

Staff were deployed in sufficient number to meet the needs of people who used the service.

This meant that the provider was now meeting legal requirements and the service was safe

Good



### Is the service effective?

The service was effective

Deprivation of Liberty Safeguard applications had been completed for people who lacked capacity to consent to remaining at the service so people were no longer unlawfully deprived of their liberty.

Good



# Appletree 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 was 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.

We undertook a focused inspection of Appletree Care home on 11 August 2015. This inspection was to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection of 16 January 2015 had been made.

We inspected the service against two of the five questions we ask about services: is the service safe and effective? This is because the service was not meeting legal requirements in relation to these questions.

The inspection was undertaken by two inspectors and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Before our inspection we reviewed the information we held about the home, this included the provider's action plan, which set out the action they would take to meet legal requirements.

We used a number of different methods to help us understand the experiences of people living in the service. We spent time observing care in the communal areas such as the lounge and dining area and met with some people in their rooms. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with nine people who used the service, five relatives, the registered manager, the activities coordinator, three registered nurses and seven care workers. At the visit we looked at staffing rotas, dependency levels and a number of audits, we also reviewed records for 40 people who had been a subject of a Deprivation of Liberty Safeguard assessment.

# Is the service safe?

## Our findings

At our comprehensive inspection of Appletree Care home on 16 January 2015 we had concerns about the number of staff employed. We found that the service did not have sufficient staff deployed to meet people's needs, which resulted in people having to wait long periods of time to receive treatment and care.

This was a breach of the Regulation 22 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which corresponds to regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focused inspection on 11 August 2015 we found that the provider had followed the action plan they had written to meet shortfalls in relation to the requirements of Regulation 18 (1) as described above.

People who used the service told us, "I know that my relative is always well cared for,"

"There are sufficient staff as far as I am concerned," "The carers here are unbelievable. They are brilliant, they really are," and "You don't have to wait for anything, there are lots of staff to help me." However some people told us that there were occasions when there was not enough staff available, one person told us, "But if they're dealing with someone else you have to wait a bit."

Staff told us that staffing levels had improved since the inspection of January 2015. Comments included, "We have enough staff now it's so much better," and "Yes we have enough staff now, we are not rushed."

The registered manager had reviewed the staffing levels in relation to the floors that provide care to the people with

the highest care needs. The ground floor (people with nursing needs related to physical ill health) and the second floor (people with nursing needs due to dementia/mental illness). We looked at rotas for the last two months and saw that there was an increased number of staff on each shift on both of these floors from four care staff to five. There was also a trained nurse on each shift on both of these floors. On the second floor the activities co-ordinator told us she spent much of her time working with the people who use the service during busy periods.

The registered manager had also reviewed the role of the qualified staff working across the service to broaden their duties. She told us, "They now support care staff to provide personal care and assist at meal times to support people who use the service. This has had a positive effect on both care staff and people who use the service as they are more actively involved in the specific care for individuals".

The registered manager told us she used a tool for assessing dependency levels across all three floors which is used to calculate staffing levels. We saw that the results of this tool were sent to the provider's head office on a regular basis for analysis.

In addition the registered manager had reviewed the timing of medicines administration to suit the needs of people who use the service, and drawn up a night time experience policy to offer a more personalised and calming approach to the end of the day. Examples of this included dimming the lights, providing time for staff to sit with people who use the service to reflect on the day and offering a hot drink and snack before bed for those who preferred to go to bed later. The registered manager had also reviewed the timing of staff breaks to ensure they are taken at times that do not impact on meeting the needs of the people who use the service.

# Is the service effective?

## Our findings

At our comprehensive inspection of Appletree Care Home on 16 January 2015 we found that appropriate Deprivation of Liberty Safeguards (DoLS) applications for people using the service had not been submitted to the relevant local authorities. This was a breach of the Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which corresponds to regulation 11 (1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At our focused inspection of 11 August 2015 we found that the provider had followed the action plan they had written to meet shortfalls in relation to the requirements of Regulation 11 (1) as described above.

The registered manager had reviewed the capacity of all the people who use the service to give consent to care and treatment and whether they may be being deprived of their liberty. We saw that applications had been made for 55 people who use the service. To date there had been best interest decisions acknowledging people's lack of capacity to agree to care and treatment for 38 people. The registered manager was still awaiting the outcome and documentation relating to the remaining 17 people.

We looked in detail at two sets of documentation for people who use the service. They were personalised and showed individual needs in detail and the type of support needed due to their lack of capacity.

Staff told us they had completed training on the Mental Capacity Act 2005 (MCA), its associated code of practice and the Deprivation of Liberty Safeguards (DoLS). DoLS provide a legal framework to protect people who need to be deprived of their liberty for their own safety. Staff showed a good understanding of the MCA and the implications of this legislation. Staff we spoke with in relation to their work with people, who lacked capacity, were all able to explain the principles of the MCA and how they might apply them.

People and their relatives praised the manager and said that she was approachable and visible. A relative told us, "She does a good job and has a caring attitude, she has the residents' interests at heart." and "She's a real people person and relates to everyone."

The registered manager had made a number of improvements following the inspection in January 2015, including the applications for Deprivation of Liberty Safeguards, increasing staffing levels, adjusting the timing of breaks for staff, and the new night time experience policy for people who use the service.

The registered manager had also undertaken audits during the night shift to ensure the service was of a high quality and had set out clear expectations of night staff and their duties.

All the staff we spoke with told us they felt supported to carry out their role and reported they had regular supervision.