

Holly Tree Lodge Limited

Holly Tree Lodge Residential Home Derby

Inspection report

2-4 Thornhill Road
Derby
Derbyshire
DE22 3LX

Tel: 01332382660

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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

Holly Tree Lodge Residential Home Derby is a residential care home providing personal care to 23 people aged 65 and over at the time of the inspection. The service can support up to 27 people.

The service is provided across two floors in a purpose-built premises.

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

People received safe care. Staff knew how to recognise and report abuse or avoidable harm, and managers took action to safeguard people. Staff followed safe medicines management protocols. The service deployed sufficient number of staff to meet people needs. They followed safe recruitment practices.

Staff support people as required by law. They had the relevant training and experience required to fulfil the responsibilities of their role. They promptly referred people to health care services and worked with other professionals to ensure people received consistent care which met their needs.

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.

Staff were kind and compassionate. They developed positive relationships with people and treated people like they mattered. The service promoted people's independence, dignity and rights to privacy. Staff supported people to be involved in decisions about their care.

People's care was tailored to their individual needs. Staff supported people to maintain relationships with people that mattered to them. The service had robust end of life protocols which supported delivery of comfortable and dignified care.

There was a visible and supportive leadership at the service. People were kept at the centre of care delivery. Staff felt engaged and valued. The provider had systems in place to monitor and improve the quality of care they delivered.

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 (published 27 January 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.

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.

Holly Tree Lodge Residential Home Derby

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 Care Act 2014.

Inspection team

The inspection was carried out by two inspectors and one 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.

Service and service type

Holly Tree Residential Home Derby 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.

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

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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 used all of this information to plan our inspection.

During the inspection

We spoke with seven people who used the service and one relative about their experience of the care provided. We spoke with 10 members of staff including the registered manager, deputy manager, two team leaders, three care assistants, two domestic assistants and the chef. We also spoke with a visiting health professional.

We reviewed a range of records. This included five people's care records and 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

- People felt safe when they received care and support at the service. They were confident in staff ability to look after them and keep them safe.
- Staff had good knowledge of what would constitute abuse or avoidable harm and took action to keep people safe. They were confident the managers would address any concerns they raised about people's welfare.
- The managers had protocols in place for reporting, investigating and dealing with concerns regarding people's safety and wellbeing.

Assessing risk, safety monitoring and management

- People's records included risks assessments of known risks associated with their care. However, risk assessments were not detailed enough to show how staff supported people to minimize or prevent the risk of harm. For example, one person's records did not state the level of support staff provided to manage their mental health needs.

We brought this to the attention of the registered manager and deputy manager who told us they would make the required improvement to the records.

- Staff practice showed a positive approach to risk management. Our observations showed their risk management practice did not restrict people's freedom or independence.
- Staff had the skills to safely support people with specialist aids, equipment and adaptations.

Staffing and recruitment

- There were enough staff on duty to meet people's needs. Staff feedback and our observations showed staff numbers were sufficient to allow them to meet people's needs in a personalised manner.
- The service followed safe recruitment practices. They completed relevant pre-employment checks and processes. This supported them to ensure they employed staff who were suited to work with people who use services.

Using medicines safely

- Medicines management was safe. Staff followed guidance and best practice for storing and administering medicines. This meant people received their medicines as prescribed by their doctor.
- Only staff who were trained in medicines administration supported people with medicines.

Preventing and controlling infection

- People were protected from the risk of contracting or spreading an infection. Staff wore protective equipment when they supported people with personal care to help prevent the spread of infection.

Learning lessons when things go wrong

- The service had systems in place to manage incidents and accidents that occurred at the service. Staff feedback showed incidents were investigated and reported to appropriate agencies where required.
- We found incidents records were not robust and did not include details of action taken following an incident. The deputy manager told us they had identified this following a recent liaison with the local safeguarding authority. They said they had met with the staff team and discussed improvements they would make.

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

- People's needs were assessed before they received care and support from the service.
- Staff collated information from professionals and other people who may be involved in looking after the person being assessed. This allowed them to have a holistic view of people's requirements to enable them to meet their needs.
- Information from assessments were used to develop people's care plans.

Staff support: induction, training, skills and experience

- Staff had the skills and experience they required to meet people's needs. Most staff had worked at the service for several years and had gained good experience of caring for people.
- Staff had access to regular training which equipped them to fulfil the responsibilities of their role. They told us their manager quickly responded to any training request they may have.
- The managers also supported staff through regular supervision meetings.

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

- People received a varied and balanced diet. The provider ensured they stocked food people liked.
- Staff had good knowledge of people's dietary requirements and met their needs. The chef told us, "I live for my work, I love it."
- People enjoyed their meals. One person told us, "I like the food and I can choose what I want."
- There was an effective arrangement to meal times where people had a choice of two dining rooms. Staff were deployed in a way that ensured they could effectively help people who required the most support to eat and drink.

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

- Staff worked collaboratively with other professionals to meet people's needs. They followed recommendations by professionals to support people effectively.
- Staff were proactive to refer people to healthcare services when required. They supported people to access these services where required.
- Records of people's daily care showed staff supported them with monitoring their health needs. This included detailed support on maintaining good oral hygiene.

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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- Records showed the relevant authorisation was in place where people were deprived of their liberty. Staff ensured any conditions stated on people's DoLS were met as stated in their authorisation records.
- Staff had good knowledge of the principles and requirements of the MCA and supported people accordingly. For example, they ensured they sought people's consent before they supported them with their care needs.
- Staff supported people and their relatives to make important advance decisions about their future care; this ensured they would receive their care as they preferred if they were unable to make their own decisions in the future. For example, planning how they would like to be cared for at the end of their life.

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

- The design and layout of the premises met people's needs. People had access to private and communal spaces which promoted their dignity and independence.
- We saw the provider had started a programme of refurbishments to update worn areas of the home.

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 were very kind and compassionate. We saw interactions between staff and people were very positive. One member of staff consistently demonstrated an exceptional ability to engage with people.
- People gave us positive feedback about the caring attitudes of staff. One person said, "They [staff] do everything they can, they are good - all of them."
- Staff treated people like they mattered. We observed staff took time to communicate with people and understand their needs and specific preferences. Staff were cheerful and relaxed throughout our visit.
- The provider had policies and systems in place which promoted non-discriminatory practices, this ensured that people had access to a good standard of care regardless of the race, culture, disability or beliefs.

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

- Staff supported people to be involved in decisions about their care. Their records showed staff supported them to express their wishes through the assessment and care planning process. Throughout our visit, we observed people expressing their wishes and staff responding accordingly.
- Each person's care plan stated the level of support they required to communicate their views and wishes. Staff supported them as stated in their care plan.
- Where required, people could have access to an advocate to support them with decision making. Advocates are independent persons who support people to express the views and rights.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect. Staff addressed them respectfully and treated them with dignity.
- The service promoted people's right to privacy. We saw staff respected a person's requirements to their privacy. One person told us, "They [staff] always knock before they come in [bedroom]."
- People were supported to be as independent as possible. One person told us how staff supported them to do as much as possible independently, offering support where required. This ensured they supported people to maintain any life skills they may have.

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 remained the same. This meant people's needs were met through good organisation and delivery.

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

- The care people received was tailored to their individual needs. Most of the staff had a long service history and had gained detailed knowledge of people's needs, likes and dislikes. They applied this knowledge to support people as they liked.
- People told us they thoroughly enjoyed living at Holly Tree Lodge. One person told us, "We did look at other homes before coming here but we all agreed this was the best and we haven't been let down." Another person said, "There is always a nice atmosphere here and they are all well looked after."
- People could express their choices regarding their care. The service had protocols in place to support people to be part of their care planning and reviews. Care plans were updated to reflect any changes in people's choices and needs.

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.

- People's records detailed support they may require for effective communication. The provider had systems in place to meet the Accessible Information Standard. This included providing information in alternative format if required.
- Throughout our visit, we observed that staff tailored their communication style to each individual, speaking to them in a way they could understand and respond.

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 and contact with those who mattered to them. Their friends and family could visit them without any restrictions
- During our visit, we saw staff supported people to participate in social activities such as indoor games.

Improving care quality in response to complaints or concerns

- The service had not received any formal complaints. People and their relatives had positive relationships with staff which supported them to raise any concerns they may have. The staff team dealt with any concerns promptly.

End of life care and support

- The service had robust protocols in place to support people's end of life care needs. The deputy manager and a member of the care team had undergone specialist end of life care training which they cascaded within the staff team. This enabled them to support people and their relatives through dignified and compassionate care.
- The service had received an award for excellent end of life support. Good end of life practice at the service included hospital avoidance care planning and ensuring increased staffing to support any person receiving end of life care.
- At the time of our inspection, none of the people living at Holly Tree Lodge was receiving end of life care.

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

- People were at the centre of the service.
- The service had an enabling and inclusive culture which sought to improve outcomes for people who used the service. We saw staff supported people to live as full a life as possible.
- Staff were happy to work within the service. They felt valued and supported in their role.

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

- The registered manager and deputy manager provided good leadership. They were easily accessible to staff, people and their relatives for support and guidance when required. Staff spoke positively of the registered manager's support, care and attention to detail.
- The registered manager demonstrated a good knowledge of their role including their regulatory responsibilities. They understood their regulatory requirements to report incidents and events to CQC, our records showed these had been submitted as required. They received a good level of support from their team and the provider. This supported them to run the service effectively.
- The registered manager received a good level of support from their team and the provider. This supported them to run the service effectively.
- Staff were clear about the expectations of their role and were supported at all levels to fulfil their role.
- The service had CCTV cameras in communal areas. They had a policy in place to guide the safe use of cameras for monitoring the care people received. They obtained people and relatives consent for the use of cameras and ensure it did not infringe people's privacy.

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 demonstrated a good understanding of the duty of candour. They understood the importance of being honest about any failings within the service and to use this a tool to make improvements to address them.

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

- The service involved people in service planning through care planning and regular care reviews.
- Relatives could give their feedback verbally or through a 'family satisfaction survey'. Records of their most

recent feedback showed relatives had a generally good experience of care at the service.

- Staff felt engaged and supported in their role. They told us their contributions were valued. A member of staff told us about an improvement that had been made at the service. They said, "anything we want to try is approved if we believe it will work we can have a go."

Working in partnership with others

- The service worked collaboratively with other professionals to ensure the care people received consistently met people's needs.
- A visiting health professional gave us positive feedback of working with the service. They described their collaboration as "Excellent, in fact just what was required."
- The service worked with higher education professionals for research purposes to improve outcomes for people who use residential social care services.

Continuous learning and improving care

- The provider had systems in place to monitor the quality of care they provided. This included checks of various aspect of people's care. These were regularly analysed, and areas of improvement were identified and acted on.