

# Treetops Nursing Home Limited

# Treetops Nursing Home

### **Inspection report**

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### Ratings

Overall rating for this service	Good •
Is the service safe?	Good •
Is the service well-led?	Good

## Summary of findings

### Overall summary

Treetops Nursing Home is located in Oldham, Greater Manchester and is operated by Treetops Nursing Home Limited. The home is registered with the Care Quality Commission (CQC) to provide care for up to 34 people, some of whom are living with dementia. At the time of the inspection there were 32 people living at the home.

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

Risks within the home were well managed and record keeping, storage of confidential information and governance systems had all improved since our last inspection.

People living at the home and their relatives told us the home was a safe place for people to live. Staff demonstrated a good understanding about how to safeguard people from the risk of abuse. Staff recruitment procedures were robust and there were enough staff to care for people safely. The premises were well maintained, with regular servicing of equipment and the building carried out. Staff wore appropriate personal protective equipment (PPE) when delivering care. Good practice was also observed regarding Covid-19.

We received positive feedback about management and leadership from everybody we spoke with including staff, people living at the home and their relatives. Staff told us there was a positive culture at the home, with good team work throughout. Appropriate systems were in place to enable staff, relatives and people living at the home to provide feedback about the care they received.

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 requires improvement (published July 2019).

#### Why we inspected

We carried out an unannounced inspection of this service in between 26 November and 10 December 2020. The inspection was carried out due to the previous inspection rating of requires improvement, where regulatory breaches had been identified.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Treetops Nursing Home on our website at www.cqc.org.uk.

#### Follow up

We will 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 well-led?	Good •
Is the service well-led? The service was well-led.	Good



# Treetops Nursing Home

**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

This inspection was carried out by an inspector 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.

#### Service and service type

Treetops Nursing Home 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 home had a registered manager in post. A registered manager and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. The home manager had applied to register with us at the time of our inspection.

#### Notice of inspection

We gave a short period of notice regarding the inspection. This was because we needed to discuss the safety of people, staff and inspectors with reference to COVID-19.

Inspection activity was carried out between 26 November and 10 December 2020. We visited the home on 26 November 2020 as part of our site visit to the service. Further inspection activity was completed via telephone and by email, including speaking with people living at the home, relatives and reviewing additional evidence and information sent to us by the service.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from professionals who worked with the service, including Oldham local authority. The provider was not

asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

#### During the inspection

We spoke with four people who used the service and seven relatives about their experience of the care provided. We spoke with six members of staff including the registered manager, who was also the registered provider of the home.

We reviewed a range of records. This included three care plans and five medication administration records (MARs). We looked at two staff files to check staff were recruited safely. A variety of other records relating to the management of the service were taken into account as part of the inspection.

#### After the inspection

We continued to seek clarification from the registered manager to validate evidence found, including quality assurance documentation and staff training records.



### 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 requires improvement. At this inspection the rating has improved to Good. This meant people were safe and protected from avoidable harm.

At our last inspection the provider had failed to ensure the safety of the building and the equipment. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

Assessing risk, safety monitoring and management

- •At our last inspection in June 2019, we had concerns regarding risk management within the home. This was because not all windows were fitted with appropriate restrictors to prevent people potentially leaving the home in an unsafe way. Potentially dangerous equipment was also not stored securely when maintenance work was in progress. We found these issues had now been addressed and was no longer an area of concern.
- People had detailed risk assessments in place covering areas such as waterlow (for skin), mobility and nutrition. Malnutrition Universal Screening Tool (MUST) assessments were also completed to monitor people's body weight.
- •Where people had been assessed as being at risk of choking and aspiration, the correct consistency of food and drink was provided to help keep people safe.
- •The premises and equipment were well maintained. Regular checks and servicing were carried out regarding electrical installation, gas safety, legionella, hoists and firefighting equipment.
- •We observed staff using correct moving and handling techniques when assisting people and did not see any evidence of unsafe practice in this area.- Moving and handling competency assessments were also carried out for staff to ensure correct techniques used.
- •Where people were at risk of developing pressure sores and required assistance to re-position themselves in bed, records were maintained when this was done by staff.

#### Using medicines safely

- •At our last inspection in June 2019, we had concerns about the safe storage of drink thickeners which left accessible in communal areas and could potentially be consumed in an unsafe way by people living at the home. Records of when people's drinks had been thickened were also not completed. We found these issues had now been addressed and was no longer an area of concern.
- Medication administration records (MARs) were completed accurately with no missing signatures. We saw staff observing people taking their medication to ensure it was safely administered. Medicines which needed to be given at certain times of the day (time critical), or with food were administered as required.
- •Medication was stored securely in a locked trolley within a secure treatment room. This included controlled drugs. Regular checks of the medicines fridge and treatment room were completed to ensure medicines did not spoil and remained safe to use.

Preventing and controlling infection

- •We were assured the provider was preventing visitors from catching and spreading infections.
- •We were assured the provider was meeting shielding and social distancing rules.
- •We were assured the provider was admitting people safely to the service.
- •We were assured the provider was using PPE effectively and safely.
- •We were assured the provider was accessing testing for people using the service and staff.
- •We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- •We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- •We were assured the provider's infection prevention and control policy was up to date.

#### Staffing and recruitment;

- Staff were recruited safely. Pre employment checks were carried out to protect people from the risk of unsuitable staff working at the home.
- •There were enough staff working at the home to care for people and the feedback we received was that staffing levels were sufficient. One member of staff said, "We always have four on at night and we are able to meet people's needs with that." Another member of staff said, "Staffing levels are always consistent, even at weekends. More [staff] are provided if needed." A relative added, "I think there are sufficient numbers of staff employed. There have always been several staff members when I have visited."

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People told us they felt safe living at the home, as did relatives we spoke with. One person said, "I do feel safe in the home and staff always help me." A relative also commented, "All residents are safe in the home."
- •Appropriate safeguarding systems were in place. Staff demonstrated their understanding of safeguarding and told us training was provided. Staff were clear about the processes they would follow and who they would report any concerns to.
- Safeguarding allegations were reported to Oldham Local authority as required.
- •Accidents and incidents were monitored closely, with details recorded about any actions taken to prevent re-occurrence.



### 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 requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At our last inspection the provider had failed to ensure good governance systems were in place. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

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

- •At the last inspection in June 2019, we identified concerns about the governance systems in place which had not been robust in identifying the issues found at the inspection. Confidential information was also not being stored securely, such as care plans and people's personal care records. We found these issues had now been addressed and was no longer an area of concern.
- Following our last inspection, we were sent an action plan by the service, detailing what work would be done to ensure compliance with the regulations. We took this into account during our inspection.
- •A detailed quality assurance audit was undertaken by the home manager each month and this covered areas such as care plans, medication, the environment, infection control and Covid-19. Night spot checks were also completed.
- •Notifications were submitted to CQC as required for incidents such as serious injuries, deaths and police incidents. These are legally required to be sent to CQC so we can decide if the need to take any further action.
- •Where any incidents had occurred and safeguarding investigations had taken place, systems were implemented so that lessons could be learnt to enable the home to keep improving.

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

- •We received positive feedback from everybody we spoke with about management and leadership at the home. A member of staff said, "The manager is understandable and always ready to support us. They listen and things get sorted out." A relative added, "I know the manager and he is good. He tends to listen to me if I have any problems."
- •Staff told us there was a positive culture at the home, with good team work throughout. One member of staff said, "Everything is fine here and it feels like my second home." Another member of staff said, "Everything is going fine from my point of view. It is a nice place to work and we have a good team."

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

- Systems were in place to involve people using the service, relatives and staff in how the home was run. This included the use of satisfaction surveys and resident/relative meetings so that feedback could be sought and used to make improvements.
- Staff supervision and appraisal sessions also took place, presenting the opportunity for staff to discuss their work and receive feedback about their performance.

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 and registered manager understood the requirements and their responsibilities under the duty of candour.
- •The registered manager was an open and honest with us about what had gone wrong at the last inspection and was very committed to making improvements to ensure at least an overall Good rating was achieved.

Working in partnership with others

- The home worked closely with a number of other organisations in Oldham. This included GP's, district nurses, social workers and other professionals involved with people's care.
- •People were also able to benefit from good links within the community including churches, schools and trips to watch local football matches. Efforts were also made to take part in celebrations such as St George's day and attendance at summer fetes in the area.