

HICA

# Elm Tree Court - Care 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

### About the service

Elm Tree Court – Care home is a residential care home divided into 3 bungalows, providing personal care up to a maximum of 72 people. The service provides support to older people, people with dementia and younger adults. At the time of our inspection there were 70 people using the service.

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

Effective safeguarding systems were in place. Safeguarding concerns were managed consistently and promptly. All staff had an awareness and understanding of abuse and felt comfortable raising concerns.

Systems were in place to record, store and receive medicines. Staff were trained and supported in their role to administer medicines. Risk assessments were person centred and contained enough information to guide staff in their practice.

There was enough competent staff across the service to meet people's needs. Recruitment was managed effectively. Staff understood their roles in raising concerns and reporting accidents and incidents. Lessons were learned and communicated to support improvement in the service.

Some decorating and minor re-refurbishment work was required. However, infection, prevention, and control was managed well. Staff were trained and understood their responsibilities for maintaining high standards of cleanliness.

The registered manager and staff created a positive culture, that was person centred and empowering. Staff spoke positively about the registered manager and senior team.

The provider monitored performance and risk in the service to promote and deliver quality improvements. Staff were fully engaged in the quality improvement plan and understood their role in driving improvements in the service.

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.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 25 April 2018).

### Why we inspected

This inspection was prompted by a review of the information we held about this service and due to the

length of time since the service was last inspected.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Elm Tree Court – Care home on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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** ●

The service was well-led.

Details are in our well-led findings below.

# Elm Tree Court - Care Home

## 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 Health and Social Care Act 2008.

#### Inspection team

The inspection was carried out by 3 inspectors and an Expert by Experience. An Expert by Experience also made calls to relatives the following day. 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

Elm Tree Court is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Elm Tree Court is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

We reviewed the information we had 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 (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 7 people who use the service and 10 relatives about their experience of the care provided. We spoke with 9 staff including the operations manager, the registered manager, the housekeeper, 2 activity coordinators and 6 care staff.

We reviewed a range of records. This included 6 care records and multiple medication records. We looked at other records relating to the management of the service including recruitment, supervision, and systems for monitoring quality.

# Is the service safe?

## Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from abuse. The provider had systems in place to help reduce the risk of abuse.
- Staff had completed safeguarding training and told us, they would report any concerns to senior members of staff or the registered manager.
- People felt safe at the service. One person said, "The carers make sure I am safe, I feel safe and secure."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks associated with people's care had been identified and plans were in place to minimise risk occurring. Staff told us, they had access to risk assessments, and they provided the right information to care for someone safely.
- Personal Emergency Evacuation Plans (PEEPS) were in place, they were informative and gave staff good guidance in evacuating people from the service.
- Accidents and incidents were analysed by the provider to look for themes and trends. Any learning was shared with staff to prevent future incidents where possible.

Using medicines safely

- Medicines were managed safely, and people received their medicines as prescribed.
- People who received 'as and when' medication had guidance in place and staff had written why it was required and how much was administered.
- Staff were trained and supported in their role to administer medicines. Records showed staff had their competencies reviewed. Staff told us, they received annual updates.

Staffing and recruitment

- There were enough staff to ensure people received safe care. We observed staff providing support and engaging in a meaningful and positive way. Staff told us, staffing levels were good and they had no concerns. A relative said, "The staffing levels are brilliant, there is always enough staff around to care for people."
- Safe recruitment and selection processes were followed.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.'
- People and those important to them were involved in making decisions about their care and treatment. Care plans included capacity assessments where required and best interest decisions were made in line with people's wishes.

#### Preventing and controlling infection

- The serviced managed infection, prevention, and control well, however some areas of the service required maintenance work. For example, decoration was required in certain areas of the service, and some fixtures and fittings required replacing or minor repairs. The provider had an action plan to address this.

#### Visiting in care homes

- People were supported to meet safely with visitors. Visitors to the service were encouraged and we observed visits taking place on the day of inspection.

# 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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager and staff had a clear understanding of their roles and how this contributed to the good level of care people received. People told us, the registered manager was approachable, and they would go to them with any concerns.
- An effective quality monitoring system was in place which monitored the quality and safety of the service through a robust audit system. Staff told us, if things were not working well, they could address it with the senior managers,
- Systems were in place to review accidents and incidents and there was evidence of lessons learnt throughout the organisation.

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

- The provider had an open and honest culture. Staff told us, they could speak to managers if they had any concerns. Comments from staff included, "I cannot fault the support I get from senior members of staff," and "Everyone gets on with everyone, we are all here for the residents."
- People and their relatives spoke positively about the service. People told us, all the staff know us and our routines. A relative said, "I am very happy with the service, I would give that home 10 out of 10."

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 an open and transparent approach and understood their responsibilities under the duty of candour.
- The registered manager was aware of their obligations for submitting notifications to CQC, as required by law.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People and their relatives were asked about their experience of care delivered and the provider was able to use this information to establish improvement in quality and care.
- Staff told us, they attended regular team meeting where they were able to express their views and discuss any issues. A staff member said, "You can speak up and put your views across and they are very useful."
- The provider worked in partnership with GP's, district nurses and other health care professionals.

Information from healthcare professionals is cascaded to staff through an electronic system to ensure care is streamlined.