

Altruistic Care Limited

# Plane Tree Court

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Plane Tree Court is a residential home which provides nursing and personal care to up to 66 people, across 3 floors. The service provides support to people with dementia and physical disabilities. At the time of our inspection there were 56 people using the service.

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

Medicines were not always stored in line with guidance and some protocols for 'when required' medication were not up to date. We have made a recommendation around this. Staff were recruited safely. Safeguarding concerns were escalated and responded to appropriately. Appropriate safety checks were in place at the service. We received positive feedback about the staff at the service. The home appeared clean throughout and there was regular cleaning of 'high touch' areas.

People had appropriate risk assessments in place. People's care plans were not always sufficiently personalised. Relatives told us that staff knew people well and how they liked to be supported. Complaints were responded to appropriately. People were supported to engage in a variety of activities which they appeared to enjoy. Relatives were encouraged to visit the service.

Staff were passionate about supporting people with end of life care and avoiding unnecessary hospital admissions.

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.

The registered manager addressed concerns with staff, during staff meetings to drive improvements at the service. The service engaged well with other professionals to support people using the service. Staff were encouraged to give feedback. Relatives felt able to talk to the staff and registered manager.

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 3 March 2020).

### Why we inspected

We received concerns in relation to staffing and cleanliness. As a result, we undertook a focused inspection to review the key questions of safe, responsive and well-led only.

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 COVID-19 and other infection outbreaks effectively.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained good.

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?**

The service was safe.

Details are in our safe findings below.

**Good** ●

### **Is the service responsive?**

The service were responsive.

Details are in our responsive findings below.

**Good** ●

### **Is the service well-led?**

The service was well-led.

Details are in our well-led findings below.

**Good** ●

# Plane Tree Court

## 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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection team consisted of 2 inspectors.

#### Service and service type

Plane 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. Plane Tree Court is a care home with 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 information we had received about the service since the last inspection. 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 reviewed documents related to the running of the service including staff recruitment files and care plans. We observed interactions between people living at the service and staff. We spoke with 4 people using the service and 5 relatives about their experience of the care they received. We spoke with 2 professionals who regularly attend the service, and 7 members of staff, including the registered manager.

# 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.

### Using medicines safely

- Medicines were not always stored safely. During the inspection the medication rooms were warm. The temperature of the rooms was not always monitored. Where they had been monitored there was no information to show action had been taken to try and reduce the temperature. It is important that medicines are stored at the correct temperature to ensure they work correctly. The provider ordered an air conditioning unit which was installed following the inspection.
- Medicines were stored securely in trollies in the medication room. Additional medication was stored on shelving above which was not lockable. Prior to the inspection the provider had ordered additional cabinets. Following the inspection, the provider informed us these had now been installed.
- We observed a container of thickener had been left out in a communal area. Thickener is a powder which is used to thicken fluids for people with following difficulties. We made staff aware of this and the thickener was moved.

We recommend the provider monitors the storage of medication to ensure medication is stored in line with the recommended guidance.

- We found a protocol for 'when required' medicine was not in place for one person. This was addressed during the inspection.
- The timing for the administration of paracetamol was not always consistently recorded. This was brought to the attention of staff during the inspection .
- Medicines were administered safely. Staff had received appropriate training in the administration of medicines.
- Relatives were involved and kept informed about any changes to people's medicines.

### Systems and processes to safeguard people from the risk of abuse

- The service had processes in place to safeguard people from the risk of abuse. There was an appropriate safeguarding policy in place. During the inspection, the registered manager responded appropriately to a safeguarding concern that had been raised.
- People told us they felt their relatives were safe at the service.
- Staff had completed safeguarding training and demonstrated knowledge in this area.

### Assessing risk, safety monitoring and management

- The service appropriately assessed risk regarding the environment. Health and safety records at the service were up to date. Appropriate health and safety checks were completed at the service in line with

their risk assessments.

- Risk assessments relating to people using the service were in place. Where risks were identified appropriate measures were put in place such as the use of sensor mats where people were identified as having a high falls risk.

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.

#### Staffing and recruitment

- Staff were recruited safely. The service conducted appropriate employment checks prior to staff commencing work. The service obtained additional references for people, if required.
- Staff were up to date with their training requirements and also completed the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- There were sufficient staff at the service. People told us there was always sufficient staff to support their relatives. One relative told us, "There is always somebody (staff) about."

#### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We found a cleaning product in an unlocked bathroom cabinet. This was brought to the attention of staff and removed.

#### Visiting in care homes

- People were supported to have visitors at any time. Relatives told us they were able to visit the service when they chose to. Visitors were encouraged to visit the service to get involved in celebrations and activities.

#### Learning lessons when things go wrong



- Accidents and incidents were reported appropriately by staff. The registered manager reviewed incidents which had occurred at the service and attempted to identify trends.
- When areas of improvement are identified these were communicated through staff meetings.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last inspection we rated this key question good. The rating for this key question has remained good. 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

- Care plans were not always personalised. Care plans contained detail to support people but had not always been sufficiently personalised to the individual.
- We found one person's care plan had identified they sometimes displayed distressed behaviours but the support outlined was not personalised.
- Relatives told us that staff knew people well and they had been involved in care planning however for some people, their likes and dislikes had not been included within their care plans. We discussed this with the management team during the inspection.
- Staff knew people's likes and dislikes and these were supported where possible. People shared examples around staff providing additional food for people in line with their preferences.

End of life care and support

- Staff were passionate about supporting people with good end of life care. The service worked closely with health care professionals to avoid unnecessary hospital admissions, where possible, so that people could choose and be supported at the home at the end of their life.
- Where possible, staff formed a guard of honour for people as part of their funeral procession to the home.
- The service had received an award in response to their end of life care provision. End of life care plans did not always reflect the level of knowledge staff had about a person.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The service recorded people's communication needs in their care plans. Easy read policies were also available.

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 have visitors and maintain relationships. Relatives told us that they were always made to feel welcome and involved.
- There was an activities team in place who led activities at the home. We observed people taking part in

singing sessions, quizzes and a barbecue during the inspection. People appeared to enjoy the activities. We observed people enjoying sharing their knowledge with staff during a quiz.

- People were given the opportunity to provide feedback and make suggestions about activities.
- We received mixed feedback about the activities. One relative felt the activities could be improved. Another relative told us, "[person] has a social life here."

Improving care quality in response to complaints or concerns

- The service responded appropriately to complaints shared by the Commission. There was a complaints policy in place which was readily available around the home.
- When concerns had been raised these were discussed with staff at team meetings to drive improvement at the service.

# 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.

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

- The registered manager promoted a positive culture at the service. The registered manager held regular 'flash meetings' with the team in the form of a daily handover. Staff representing sectors from across the service attended this meeting. We observed staff working collaboratively, sharing suggestions and giving feedback and praise to their colleagues.
- People and their relatives felt supported by staff. We received positive feedback from people's relatives particularly around supporting them as their relative moved into the service. One relative told us "[Relative] has been able to express what they want and all my considerations have been taken into account." "They [staff] are not only taking care of [relative] they are taking care of my anxieties as well."
- Staff told us they felt supported by the registered manager. The registered manager showed their appreciation to staff on Employee appreciation day.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements, 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 registered manager and the provider carried out regular audits at the service. Audits identified when actions required addressing. Action plans had not always been recorded as completed and had not driven improvement in personalising the care plans.
- Incidents had been reported to the Commission when necessary.
- The registered manager understood their duty of candour responsibilities.

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

- Staff and people using the service were engaged and involved in the running of the service. Staff were able to give feedback and discuss the service during staff meetings.
- People and their relatives told us they felt able to talk to staff about any concerns and that these would be looked at. One person told us 'They [staff] are very supportive of us.'
- Staff were supported with regular supervisions with the management team.
- We received positive feedback about the staff at the service. One relative told us, "There is so much laughter going on and kindness." They also said "Any minor thing is treated with seriousness. People listen to you."

Working in partnership with others, Continuous learning and improving care

- The management team and staff had built good relationships with other agencies. We received positive feedback from professionals who work with the service. One professional told us "They [staff] are on the ball."
- The management team were passionate about supporting health students and facilitated placements for students at the service.
- The registered manager shared their experience at the registered manager's forum about the student placements to promote this project in the area.