

Appletree Support Limited

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Inspection report

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Date of inspection visit:
14 May 2019

Date of publication:
02 July 2019

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:

Appletree Support Limited is a domiciliary care agency, providing personal care services to children and young people in their own homes. Some of the children and young people had very complex needs and were living with a learning disability, a physical disability or sensory deprivation. At the time of our inspection there were nine children and young people receiving personal care and support from the service. The service also provided support services to people and their families that were outside the remit of our regulatory activities because they did not involve personal care.

What life is like for people using this service:

Children and young people received personalised care that met their needs and preferences. Staff recognised the risks to children's and young people's health, safety and well-being and knew how to support them safely. Children and young people received their medicines as prescribed. Everyone was cared for by staff who were kind and caring and their privacy, independence and dignity were promoted. Staff were supported in their roles. They took part in regular training and supervision. Staff told us they enjoyed working at the service and felt well supported by the management team. A quality assurance system was in place to continually assess, monitor and improve the service.

The service met the characteristics of Good in all areas. More information is in the full report which is on the CQC website at www.cqc.org.uk.

Rating at last inspection:

Good (report published 20 December 2016)

Why we inspected:

This was a planned inspection based on the rating at the last inspection.

Follow up:

There is no required follow up to this inspection, however we will continue to monitor the service through information we receive.

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 findings below.

Good ●

Is the service effective?

The service was effective

Details are in our findings below.

Good ●

Is the service caring?

The service was caring

Details are in our findings below.

Good ●

Is the service responsive?

The service was responsive

Details are in our findings below.

Good ●

Is the service well-led?

The service was well-led

Details are in our findings below.

Good ●

Appletree Support Limited

Detailed findings

Background to this inspection

The 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 checked whether the provider is 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.

Inspection team: One inspector and a specialist paediatric nurse conducted the inspection.

Service and service type: Appletree Support Limited is a domiciliary care agency providing personal care and support to children and young people living in their own homes. 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 announced. We gave the provider 24 hours' notice of the inspection site visit to ensure that the registered manager would be present, and to ensure people's consent was gained for us to contact them for their feedback.

Inspection site visit activity started on 14 May 2019 and ended on 22 May 2019. We visited the office location on 14 May 2019 to see the manager and office staff; and to review care records and policies and procedures.

What we did:

Before the inspection we reviewed information we held about the service, including previous inspection reports and notifications. Notifications are information about specific important events the service is legally required to send to us. We also considered information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once a year to give some key information about the service, what the service does well and improvements they plan to make.

We spoke with four parents by telephone and one parent responded to our questions by email. We spoke with three members of staff in person, two by telephone and two staff members responded to our questions

by email. We also spoke with the registered manager and the provider. We received feedback from two health and social care professionals. We reviewed records which included four young people's/children's care plans and daily records and four staff files. We reviewed the provider's policies, procedures, and records relating to the management of the service such as staff training and supervision records, the complaints file and quality assurance systems.

Is the service safe?

Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Staffing and recruitment:

- Hours of support were agreed with the local authority and delivered in conjunction with family's requirements. On occasion, support was not delivered at a preferred time. This was due to staff absence. If staff were unable to visit on an arranged day the office staff would arrange for the hours to be made up at a time suitable for the family. This ensured the provider was fulfilling their contractual agreement and young people and children received the full amount of agreed hours over a specific time period. The provider told us that additional staff were in the process of being recruited and introduced to families so children and young people had more staff who had the specific training to support them at the preferred times.
- The provider had robust recruitment procedures in place. Records confirmed these were followed fully to help ensure only suitable staff were employed.

Systems and processes to safeguard people from risk of abuse:

- Appropriate systems were in place and followed to protect young people and children from the risk of abuse.
- Staff had completed training in safeguarding adults and children from abuse and were aware of the types and signs of abuse and how to report any concerns.
- Staff were confident that if they raised a safeguarding concern with the provider or registered manager, it would be taken seriously. One member of staff told us, "I blew the whistle on another member of staff. I was protected, and my report actioned upon."
- Records confirmed that all safeguarding concerns had been reported and investigated appropriately, in liaison with the local safeguarding team.
- The provider had initiated a cyber safety campaign and introduced cyber ambassadors. This was to support young people and children to be safe when using the internet.

Assessing risk, safety monitoring and management:

- Risks to young people's and children's personal safety had been assessed and plans were in place to minimise them.
- Risk assessments were linked to the individual child/young person which included areas such as their support needs and health conditions. Risk assessments were comprehensive and provided staff with clear guidance about how to reduce risks for the child/young person. Records demonstrated that where a child/young person experienced a health complication, staff followed the guidance on the risk assessments which ensured their safety.
- Staff were knowledgeable about the risks associated with the young people's/children's needs and could tell us what action was needed to promote young people/children's safety and ensure their needs were met.
- Strategies to support young people and children with behaviour that may place them or others at risk were tailored to each individual child/young person. One parent stated, 'Things are much calmer and the number

of violent outbursts has reduced since they (Appletree staff) started supporting my children.'

- Environmental risk assessments were carried out to consider and mitigate any risks to young people, children and staff.

Using medicines safely:

- Where staff were responsible for supporting young people and children with their medicines, suitable arrangements were in place to do this safely and in accordance with best practice guidance.
- Staff had been trained to administer medicines and had been assessed as competent to do so safely.
- Medicine administration records confirmed that young people and children received their medicines as prescribed. Where children were prescribed PRN (as required) medicines, there were protocols for when to administer these. For example, one child had epilepsy and was prescribed emergency medicines to be taken in the event of a seizure. Information on how and when to administer this medicine was clearly documented in the child's records.

Preventing and controlling infection:

- Staff had received training on infection control and this was regularly refreshed. Staff confirmed they had access to protective personal equipment which was available in the office.
- All parents with the exception of one told us that staff followed good practice in infection control. One parent told us, "The support worker is good about washing her hands." However, one parent told us of their concerns when staff attended work when they appeared unwell. We discussed our concerns with the provider who told us that staff did not support young people or children if they had an infectious illness. However, they had respected the parents' concerns and had since put measures in place to ensure staff did not attend if they appeared unwell.

•Learning lessons when things go wrong:

- The provider had a system to record accidents and incidents. We viewed records and saw appropriate action had been taken as necessary.
- The provider was keen to develop and learn from events. Staff were encouraged to reflect on where things could have been improved and used this as an opportunity to improve the service for children and young people and for staff. For example, where a staff practice issue had been identified during the night, the staff member had undertaken reflective practice and the provider implemented measures for all staff to reduce the likelihood of this happening again.

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

Good: 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:

- Children, young people and their parents were involved in the assessment process and this was in line with current legislation and good practice.
- Care was planned and delivered in line with young people's and children's individual assessments, which were reviewed regularly or when needs changed.

Staff support: induction, training, skills and experience:

- Staff were competent, knowledgeable and skilled. They carried out their roles effectively. One parent told us, "Staff are skilled and trained well."
- Staff needed specific and enhanced training to meet the individual needs of the young people and children they supported. This was provided in a variety of ways and specialist healthcare professionals and advisors were sought when necessary.
- New staff received an in-depth induction. They usually spent time shadowing experienced staff with the children and young people that they would then go on to support alone.
- Staff were positive about the training that they received. One member of staff told us, "I've learnt and grown a great deal with Appletree, and I couldn't be more thankful for all the opportunities they've provided me with."
- Staff were supported through regular supervision. Staff told us this was useful, and they could additionally, gain support from the registered manager or provider at any time in between this.

Supporting people to eat and drink enough to maintain a balance diet:

- Where children and young people needed support with their nutrition and hydration needs, this was provided.
- Individual dietary requirements were recorded in care plans and staff knew how to support children and young people effectively.
- Some children used a specific medical device to receive their nutritional requirements and this was clear in their records. Their parents told us that staff supported children with this competently.

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

- Staff worked alongside healthcare professionals to ensure children's and young people's needs were met when appropriate.
- Children's and young people's health needs were clearly recorded in their support plans and contained information from a range of health care professionals. Care records demonstrated that staff strictly followed any guidance issued by healthcare professionals, including specialists.

- Parents confirmed that staff followed instruction from them. One parent stated, 'I handover to both support workers at the start of the shift and on their return, they feedback to me anything that I need to know, this maintains a consistent approach.'

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. This legislation relates to people over the age of 16 years old.

- We checked whether the service was working within the principles of the MCA and found it was.
- The registered manager understood their responsibilities in ensuring young people were assessed should a young person lack capacity or require restrictions for their safety.
- A referral had been made to an advocate for one young person. This helped to ensure the young person had appropriate support to make decisions.
- Staff had also completed MCA training to ensure they were aware of this legislation and could put its principles into practice.
- Parents felt the support workers took the time to provide an explanation to the young people and children, so they felt involved and understood what they were going to do. One parent told us, "Yes, they talk to [Name] telling her what they are going to do."

Is the service caring?

Our findings

Caring – this means that the service involves and treats people with compassion, kindness, dignity and respect

Good: 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:

- Parents told us that staff cared for their children in a kind and caring way. Comments included, "They (staff) are brilliant." and "The staff are kind and caring." One parent told us that their allocated support worker "already felt like a part of the family" despite only working with them for a short time. Another parent told us how their allocated support workers engaged really well with both their children and created a positive atmosphere during visits.
- A social care professional was also positive about the support children and young people received from staff. They stated, 'I have had feedback from parents who report that their carers have been excellent and build up good relationships with good boundaries with both child and parents.'
- Young people and children were receiving care and support which reflected their diverse needs in respect of the seven protected characteristics of the Equality Act 2010 that applied to people using the service which included age, disability, gender, marital status, race, religion and sexual orientation. Staff had received training in equality and diversity and parents and staff told us that they thought all people were treated fairly. An example was given where two children were victims of hate crime in the community and the parent told us that Appletree had supported them well with this.
- Staff placed value on the relationships they formed with children and young people. One member of staff stated, 'I love my service users. I would do anything to help them and support them above and beyond my duty.' and another said, "I just adore them (children), I didn't think I would get such a connection with them".
- The provider gave examples of where support workers displayed their caring nature. For example, one support worker was leading a project which would enable a child to enjoy their garden and another had hand made an item which enabled the child to be independent in playing their favourite game. The provider told us that they had put one support worker forward for an award due to ongoing commitment to their role.

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

- Where possible, staff were matched to children's/young people's needs and requests to promote a positive working relationship between each other. Parents told us that sometimes where a match had not gone well, staff were changed to ensure the child/young person and their families felt comfortable with the staff members who were visiting them.
- Records showed that assessments were carried out which captured children's and young people's preferences as well as the routines of their families. A parent told us, "The staff listen to what we want, give me control and then do their part, it works well."
- The service was working within the Accessible Information Standard (AIS). The AIS is a framework put in place from August 2016 making it a legal requirement for all providers to ensure people with a disability or

sensory loss can access and understand information they are given. For example, feedback forms were provided in a picture format to young people and children.

- Detailed information about children's and young people's communication needs was in care plans. For example, one child's person's care plan stated 'Allow [Name] at least a minute to respond to questions, [Name] has excellent eye contact and facial expressions.'
- Records demonstrated that staff followed the information in care plans which enabled parents to make decisions about their child's day to day life.

Respecting and promoting people's privacy, dignity and independence

- Care was provided in a way that respected the privacy and dignity of children, young people and their families.
- Young people and children were supported to be independent as far as possible. Staff gave examples of how this was achieved. One member of staff told us, "I always give [Name] as much choice as possible and encourage them to do as much as possible for themselves."
- Children, young people and their parents were asked if they had a gender care preference regarding staff who might be providing personal care support. One parent confirmed, "I only want female staff." This was provided.
- Care files and information regarding children and young people who used the service had been stored securely and only accessible by authorised staff when needed. This demonstrated people's confidential information had been stored appropriately in accordance with recent changes in legislation. Staff had undertaken training regarding General Data Protection Regulation (GDPR).

Is the service responsive?

Our findings

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

Good: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control:

- The service was centred around each young person's/child's needs. This meant children and young people received personalised care and support. One staff member told us, "The best thing about Appletree is that it is small and friendly, very orientated to each child, very tailor made and caring, staff genuinely want the best for each child."
- Children and young people were mostly allocated consistent staff to support them. However, at times, staff who were less familiar with young people and children were required to work with them. This was due to staff absence. Parents told us that when consistent staff supported their children, "things run perfectly" but when staff who were less familiar with their children supported them, it was not so easy. For example, one parent told us, "I need consistency with [Name], they can play up if it's someone they don't know ... I hope they won't take [Name's] main carers away." The provider told us they had plans in place to ensure staff consistency as much as possible.
- Regular staff supported young people and children for the majority of the time and they had got to know them well. Staff understood how to meet young people's and children's individual needs and spoke knowledgeably about their likes, dislikes, interests and what was important to them.
- Staff told us care plans and risk assessments provided them with guidance and instructions on how to support the child or young person. Care plans were detailed and clearly outlined what was important to young people, children and their families. Information about preferences and routines were clear for staff. For example, one child's care plan detailed how to help them settle for a good night sleep, including what toy they preferred to have with them.
- Records demonstrated that care plans were regularly reviewed and discussed with parents. The management team ensured children's/young people's needs and any changes were communicated effectively amongst the staff. Information was shared between staff through phone calls to managers, the records kept after each visit and meetings.
- Appletree supported young people and children to achieve goals and outcomes that were agreed with parents. For example, they sourced literature and accessories to help one child to develop processing skills. Goals were monitored and reviewed to ensure they were achieved where possible.
- The provider told us that they provided resources for specific, individual needs. For example, one child was provided with an interaction toolkit to enhance their sensory interaction and another child was supplied with a sensory bag which included items to help the child to feel calm. This meant the provider was responsive to children's and young people's individual needs.
- Parents confirmed that staff supported their children with their chosen activities. This included singing, storytelling and swimming.
- The provider had recently organised an Easter egg hunt for children and young people to take part in. Parents and staff confirmed this had been a great success.

Improving care quality in response to complaints or concerns

- There was a complaints procedure in place and people told us they felt able to raise concerns.
- We viewed the complaint records and saw each had been investigated and responded to, in accordance with the provider's policy.
- The provider told us they used complaints as an opportunity to learn from and improve the service.

End of life care and support

- At the time of inspection, no children or young people were receiving end of life care. The registered manager told us they would support young people and children at the end of their lives if necessary and would arrange appropriate training for staff and seek support from external health care professionals to manage this.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility:

- The provider, registered manager and staff were highly committed to delivering person centred and high-quality care to children, young people and their families.
- All parents with the exception of one were positive about the management of the service. A healthcare professional told us, "I have found the organisation to be both professional and very efficient and I am impressed by the professionalism of the organisation especially where there are concerns of risk."
- Staff told us that they felt supported by the provider and registered manager. Examples of where the provider had gone the 'extra mile' to support staff were given to us. One example included supporting a staff member with an application to foster a child. The staff member told us, "[Provider] arranged for me to complete some courses through work that are valuable for both Appletree and fostering and have been so encouraging along the whole process... Knowing we have the full support of my work was a big relief."
- The provider celebrated staff success and had a reward system in place. Staff confirmed they enjoyed their work and were motivated to do well. One staff member told us, "This is the best place I've worked, every day is different."
- The provider demonstrated an open and transparent approach to their role. Where any safeguarding concerns were raised, or accidents occurred, relevant people were informed, in line with the duty of candour requirements, and CQC were notified of all significant events.

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

- There was a clear management and staffing structure and staff were aware of their roles and responsibilities. There was an on-call system in place so that staff and parents could talk out of office hours with staff from the management team should they need to.
- There were effective quality assurance systems in place. Audits were carried out on a range of areas including, staff records, children's and young people's records and the visit records to ensure information was recorded, informative and up to date. Supervisory checks of staffs practice took place. This ensured the management team were confident that staff were working to the expected standard.
- The provider had an improvement plan in place. Areas for development included: embedding policies and procedures to avoid discrimination, changing the way that introductions between children/young people and staff took place and record keeping.
- The provider had organised a team day, this supported staff to be able to recognise their own traits and values. This aimed to improve team work and communication with each other and the people they supported.

- The provider used guidance from nationally recognised sources and had made links with other providers to support them to continuously improve.

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

- The provider told us they engaged children, young people, parents and staff in the running of the service.
- Some children and young people were able to complete a feedback form after each visit. This was in an accessible and age appropriate format. The management team monitored and analysed these which ensured a good understanding of the child's/young person's experience of the support they had received. Staff confirmed this analysis was shared with them. One staff member told us, "It is nice to hear feedback."
- However, parents told us that they were not regularly asked for feedback and when they had provided feedback, they were not always sure what action was taken in response to this. Records demonstrated that feedback was used to make improvements for the service and the people using it. Some parents and staff told us they felt communication could be improved at times. The provider was in the process of improving their communication methods.
- The registered manager explained they had an open-door policy and an inclusive culture to ensure staff could raise concerns or make suggestions. Staff told us they felt listened to, valued and able to contribute to the running of the service. For example, one staff member told us that they fed back that they did not always know who the out of hours manager was. In response to this, the provider had made sure this information was clear and available to staff who worked out of hours. Staff had regular meetings and told us these were informative.
- Appletree was part of the 'Disability Confident Committed' initiative. This meant staff who had a disability were supported in their work. One staff member told us, "I am very fortunate to be employed by a company that takes such care of staff members with disabilities and am grateful for the care that they have given and also the dignity that they have shown me. I feel like a valued and appreciated member of the team and cannot praise them enough."
- The provider ensured all people and staff were treated fairly and were not discriminated against due to any protected characteristics. Records highlighted an incident of discrimination towards a staff member and demonstrated that they were well supported by the provider.

Working in partnership with others:

- The service had strong relationships with other statutory and voluntary agencies, promoting positive outcomes for children and young people. This included good networks with local schools, community short breaks team, specialist community nurses and social workers.
- We saw evidence where Appletree had worked effectively with multi-disciplinary teams to provide good outcomes for the children and young people they supported.
- Appletree also supported young people and children who did not use their service. For example, they had donated sensory equipment to a local school. An email from a teacher at the school stated, 'I am writing to inform you of how [Provider] has recently helped our school to develop a Nurture Room. The support that [Provider] has given us will certainly make a difference to firstly our more vulnerable children, but also to the rest of the school who will benefit from calmer classrooms.'