

Cherry Tree Court Care Home Service

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Type of inspection:
Unannounced

Completed on:
21 June 2022

Service provided by:
The Richmond Fellowship Scotland

Service provider number:
SP2004006282

Service no:
CS2009194187

About the service

Cherry Tree Court has been registered with the Care Inspectorate from 1 April 2011.

The service is provided by The Richmond Fellowship Scotland (TRFS) which is a registered charity provider of services, for people with learning disabilities and people who are on the Autistic Spectrum.

The service is registered to provide a care home service to a maximum of 11 adults with learning disabilities, mental health problems and physical and sensory impairments.

About the inspection

This was an unannounced which took place on Monday 20 June 2022 and Tuesday 21 June 2022. The inspection was carried out by one inspector from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included, previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- Spoke with three people using the service and one of their family
- Spoke with eight staff and management
- Observed practice and daily life
- Reviewed documents.

Key messages

- People experience very good outcomes.
- People spoke very highly of the service.
- Care plans could be streamlined and written in the first person.
- The quality of training could be evidenced better.
- The service was well led by a committed manager.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	5 - Very Good
How good is our leadership?	5 - Very Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

5 - Very Good

Our evaluation for this key question was overall very good. We found strengths outweighed weaknesses.

People had access to appropriate health care professionals, which ensured that their health and wellbeing needs were being met.

We thought it would be helpful if the service reviewed how it currently administers medication, to ensure it has a robust record of medication held in stock. E.g. Diazepam.

We observed that people were treated with compassion, dignity, and respect.
People were well presented and appeared comfortable and confident within the home.

We observed that staff were caring, patient and kind in their interactions and demonstrated that they knew the people well and how best to support them. Staff were very good in their approach, helping people to retain independence and alleviate anxiety and distress as much as possible.

We found that the information in care plans was repetitive in places, which meant that they could be overly complicated and were not always easy to read. However, we did find some very good information in care plans, detailing how people should be supported.

We thought that care plans would be more meaningful if they were written in the first person and were streamlined.

The service complied with 'Open with Care' guidance, which meant that people had unrestricted access to visitors who were important to them. This meant that people's human rights were respected and they were able to enjoy the psychological and social benefits of friends and family visits.

In terms of infection prevention and control (IPC), the care home appeared clean and tidy throughout. There were no malodours.

There was a good stock of Personal Protective Equipment (PPE) around the home with handwashing and disposal facilities in place. The staff team had received training and support to use PPE correctly and were following correct IPC guidance.

Staff were knowledgeable of correct procedures for correct use of PPE.

Staff had received training on infection control training through eLearning and this was complemented by observation of practice by management.

This meant that we could be confident that staff had ample PPE, the necessary skills and training to minimise the risk of infection, as far as is possible, to help keep people safe.

We found that the service was cleaned each day, to keep all areas clean and this was evidenced by the completion of cleaning schedules.

Staff indicated that they had enough training to give them the skills and knowledge to carry out their job effectively

How good is our leadership?

5 - Very Good

Our evaluation for this key question was overall very good. We found strengths outweighed weaknesses.

The service had an informative, detailed, comprehensive, exhaustive and effective system of quality assurance in place, to evaluate how the service was performing.

This meant that we could be confident that the service was very good at identifying any issues and taking appropriate steps to address these.

The manager was responsive and committed to continuous improvement and this was reflected in how the home was performing.

We saw very good competency checks were in place for medication management. This meant we could be confident that people were receiving their medication accurately.

It was good to see that a development plan was in place, which demonstrated the service was committed to continuous improvement.

We found that some weight and fluids charts had not been completed correctly. The manager acknowledged this and agreed to address this.

The service complied with legislation and ensured that people's care plans were reviewed at least once every six months.

We advised the manager to ensure that the service continues to comply with the guidance in Rights, Risks and Limits to freedom as appropriate, and recommended more detail to evidence the agreement that is in place.

We were satisfied that medication was being administered safely and that people's finances were being managed, to keep people's monies safe, which complied with best practice.

We found that the service had a very good system to analyse incidents using ABC charts. It was good to see that workshops were held to learn from and improve practice going forward.

We discussed how ABC documents were recorded and suggested that they could be further improved, if the records showed why someone behaved in a certain way e.g. agitation, and indicated the likelihood of the person carrying out the behaviour recorded.

We asked the manager to forward the report from Fire and Rescue Services (FRS) when it is received.

From the records we saw it wasn't always clear when minor repairs had been completed.

We suggested that the service explore the training resource NES/SSSC Promoting Excellence Framework, to further improve the support for people with dementia.

We found that staff had access to regular supervision which included, reflective practice. We thought that this was a good start and the service was moving in the right direction.

We looked at how reflective practice was recorded and we thought that this could be improved and further developed.

We suggested that the service should review how it demonstrates reflective practice to further enhance the development of the service.

We signposted the service to the SSSC publication 'The Framework for Continuous Learning in Social Services' for information and guidance.

We found very good evidence that care plans were being audited regularly.

We saw a detailed and comprehensive complaint investigation report as a result of a complaint, made to the Care Inspectorate and passed to the provider to investigate.

We thought it would be helpful if the service was able to demonstrate if the person making the complaint was satisfied with the outcome of the investigation.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	5 - Very Good
1.3 People's health and wellbeing benefits from their care and support	5 - Very Good
1.4 People experience meaningful contact that meets their outcomes, needs and wishes	5 - Very Good
1.5 People's health and wellbeing benefits from safe infection prevention and control practice and procedure	5 - Very Good
How good is our leadership?	5 - Very Good
2.2 Quality assurance and improvement is led well	5 - Very Good

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