

Cambian Asperger Syndrome Services Limited

Pear Tree House

Inspection report

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Queens Park
Bournemouth
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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

Pear Tree House is a care home that provides accommodation and personal care for up to five people diagnosed with autistic spectrum disorders and learning disabilities. At the time of this inspection there were four people living at the home.

The service is situated in the Queens Park area of Bournemouth. The premises comprise of a three story house with five bedrooms all with en suite facilities and communal living areas. These include a kitchen/diner and separate lounge. The garden provides areas for both recreation and seating for people to use as they wish.

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

We expect health and social care providers to guarantee people with autism and learning disabilities the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support:

The model of care and setting maximised people's choice, control and independence. People were supported to make choices about their daily lives and participate in activities they enjoyed. Staff knew people well and supported and encouraged people to live their best lives. Staff understood the importance of social inclusion and supported people to maintain and develop relationships and engage in the wider local community.

Right care:

Care was person-centred and promoted people's dignity, privacy and human rights. Positive behaviour support plans provided clear guidance for staff which ensured people received consistent, person centred care. Staff were knowledgeable regarding how people preferred to be supported and understood people's individual behaviours and which events may trigger anxiety. People were supported and enabled 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.

Right culture:

The ethos, values, attitudes and behaviours of management and care staff ensured people using the service led confident, inclusive and empowered lives. Staff created a friendly, homely environment where people were supported to achieve their short and long term goals.

People told us they felt safe and enjoyed living at Pear Tree House. People were relaxed and happy with staff who knew them well and supported them in ways they preferred. People were treated with dignity and respect that valued them individually. Relatives and health and social care professionals all spoke highly of the management and staff team and commented they were very happy with the service and level of care people received.

There was a robust risk assessment system in place. Risks to people's health, safety and well-being were regularly assessed, reviewed and updated. Where appropriate people and their families were fully included and involved in their care and support. People's and relative's views and opinions were listened to and acted upon.

Staff understood how to identify and report abuse and were well supported in their roles. Staff received regular team meetings, supervision and annual appraisals and completed a variety of training courses to enable them to carry out their roles competently.

Staff were recruited safely. There were enough appropriately trained and experienced staff to support people in ways that suited them.

Medicines were managed, stored and administered safely. People were supported to take their medicines safely by staff who had received the appropriate levels of training and had their competency regularly checked.

Cleaning and infection control procedures followed the relevant COVID-19 guidance to help protect people, visitors and staff from the risk of infection. Government guidance regarding COVID-19 testing for people, staff and visitors was being followed.

People received healthy, nutritious meals which they enjoyed planning and cooking for themselves and others.

The service worked collaboratively with health care professionals to ensure people received the best care and support at all times. Staff were responsive to people's changing support needs and adapted care and support according to their health needs.

The service was well-led by a registered manager who was approachable and respected by the people, relatives, health care professionals and staff. We received extremely positive feedback regarding the registered manager and their open, supportive and proactive approach to ensuring each person was supported to live their best, independent lives.

There were robust quality assurance systems in place to drive improvement and ensure the home offered a safe, effective, caring and responsive service.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 8/8/2019 and this is the first inspection.

Why we inspected

This was a planned 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 COVID-19 and other infection outbreaks effectively.

Follow up

We will continue to monitor information we receive about the service until we 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was 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 ●

Pear Tree House

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

As part of our 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 two inspectors.

Service and service type

Pear Tree House is a care home. People in care homes receive accommodation and personal care as a single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection. This service did not provide nursing care.

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

We gave the service 24 hours' notice of the inspection. This was because the service was small, and people are often out, and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection

We reviewed information we had received about the service since our last inspection. We sought feedback from the local authority and health care professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us

with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspections.

During the inspection

We met with two of the people living at the service and spent some time with them. We observed and listened to how staff interacted with people. During the visit we spoke with the registered manager, the deputy manager, the head of care, and five support workers.

We observed how people were supported and, to establish the quality of care people received we looked at records related to people's care and support. This included two people's care plans, care delivery records and all four people's Medicine Administration Records (MAR). We also looked at records relating to the management of the service including staffing rota's, recruitment, supervision and training records, premises maintenance records, quality assurance records, and a range of the providers policies and procedures.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We reviewed the additional documentation we had requested from the registered manager. We requested written feedback from seven health care professionals who worked with the service and spoke with five relatives.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff understood how to recognise the different types of abuse and spoke knowledgeably about reporting concerns.
- One person said, "I feel safe living here." A relative told us, "[Person] feels safe and secure. It's a lovely environment all new and kept as a proper home, with nice homely touches which is important." Another relative said, "Yes of course he is very safe. I'm really, really pleased."
- There was a safeguarding and whistleblowing policy in place which gave staff clear guidance to follow in the event they needed to refer any concerns to the local authority.

Assessing risk, safety monitoring and management

- Risks to people and the service were managed so that people were protected and their wishes supported and respected.
- Personalised risk assessments were in place. These considered risks relating to the environment as well as any risks to the person. People were supported to take positive risks and were involved and included in their risk assessments. This ensured a reduced risk of harm with the least possible restriction to people's freedom, and independence.
- People had positive behaviour support plans. These were up to date and in line with best practice. They gave clear guidance for staff on what may trigger anxiety or incidents for each person and how to safely de-escalate a situation. Staff knew people very well and demonstrated extensive knowledge of what could cause people anxiety or distress. Staff understood what could trigger behaviours and how to support people to avoid these triggers.
- Staff were given the opportunity to take part in supportive de-brief sessions following specific incidents where people and/or staff had become anxious and upset.
- There were systems in place to ensure the premises were maintained safely. Emergency plans were in place highlighting the support people would need to evacuate the premises in an emergency situation, such as a fire.
- Up to date service and maintenance certificates relating to electric, gas, fire and water systems were available. Legionella testing had been completed which showed the premises were free from legionella. Legionella are water borne bacteria that can be harmful to people's health.

Staffing and recruitment

- There were robust recruitment practices in place and the relevant checks had been completed on all staff before they commenced their employment at Pear Tree House.
- There were enough appropriately trained staff employed to support people. A member of staff told us,

"Staffing levels are great, there are enough staff to care safely for everyone. We use the same bank member of staff for consistency and we have enough time to support people safely."

- People were given the opportunity to take part in the recruitment process by putting forward questions for prospective care staff. People were able to meet future staff and their views were taken into account before staff were employed by the service.
- Staff rotas correctly reflected the levels of staff on duty during our inspection visit. Annual leave or staff sickness was covered by existing staff or the providers bank staff. The same member of bank staff would provide cover to ensure consistency of care for people living at the home.

Using medicines safely

- Medicines were safely managed, stored, administered and disposed of safely. People received their medicines when they needed them. Records showed stock levels of medicines were correct and regular medicine audits were completed.
- The service had recently started using an electronic medicine management system, which some staff had initially found challenging. To support the staff with the transition to this system the registered manager had written a detailed, guidance booklet that provided clear, accurate guidance for them. Staff had found this to be extremely helpful. A member of staff told us, "The system is the best. It cuts down on meds errors. If an error happens, it is spot on, the computer flags it all up, so I really like it."
- Some people had been supported to move to administering their own medicines. This ensured and maintained their independence in preparation for living a more independent lifestyle.
- There were clear protocols for administering PRN (as required) medicine and staff spoke knowledgeably about administering PRN medicine.
- Staff who administered medicines had received up to date medicine training and had their competency checked.

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 meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- 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 were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Learning lessons when things go wrong

- Accidents and incidents were recorded, reviewed and analysed to ensure any trends or patterns could be highlighted.
- Incidents and accidents were discussed at staff team meetings and at daily handovers to ensure that learning from incidents could be undertaken. Any patterns of behaviour were closely monitored to form part of people's positive behaviour support plans. Appropriate action was taken to ensure lessons were learned and shared.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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

- The service worked consistently with people to improve their independence, well-being and health. A relative told us, "It's absolutely fantastic... We were always told how crucial a placement would be, but I couldn't imagine quite how astonishing and such a huge, huge impact Pear Tree has had with [person]. They are so supportive of us as well...[person] has absolutely flourished in the last year."
- The provider worked closely with relatives and health professionals to make sure people's physical, emotional and social needs were fully assessed before they began to use the service. One health professional commented, "Paperwork and systems are efficient and well run. Spending time with the young people is the top priority and they have found ways of working more effectively to allow this."
- The service used a Department of Health recognised approach called Positive Behaviour Support (PBS). PBS is an assessment to understand the behaviour of an individual to help understand and support people with behaviour that might challenge. PBS plans used known information about each person, their views and the views of their family and staff to fully understand the reason and triggers for their behaviour.
- Assessments were unique to each person and contained information and guidance for staff to follow to ensure people were effectively supported in ways they preferred. Staff worked consistently with people to encourage and support their independence.
- People, their relatives and health and social care professionals were involved in ensuring the 'transition period' from one service to Pear Tree House was as effective, smooth and planned in a way to ensure people's needs were understood and met. A relative told us, "They are all so supportive. It all started well before [person] moved into Pear Tree. There was a fantastic transition and they understood it needed to be right from the start."
- People were supported to be themselves and given access to information and support to live their lives as they chose. This included them being provided with support to consider all aspects of their gender, sexual orientation and disability.

Staff support: induction, training, skills and experience

- All staff spoke positively regarding the induction process they had received. The induction process consisted of both electronic online courses and practical face to face sessions delivered by the providers own training team. Staff spent time shadowing more experienced staff, so they got to know the people before caring and supporting them independently. A member of staff told us, "The training covered all that I needed, it also covered bereavement. The induction training was supportive, we complete shadow shifts, so we get to know the people first and are not thrown in at the deep end. If you have a developing need for specific training, they will support you to do this."
- People were supported by a consistent staff team, who knew them well. The service recognised people

benefitted from being supported by a small team of staff who knew how people preferred to be supported.

- People were well supported by appropriately trained staff. Staff told us they found the training provided useful and well delivered. One member of staff commented, "We have our own trainers and all training is done at our college. We have an external company do our First Aid training; all the training is good, it all makes sense."
- There was a process in place to monitor and review training to ensure staff received their required training and were kept up to date with best practice.
- Staff received regular supervision meetings which were helpful and supportive. The sessions were used to develop and motivate staff, reviewing their practice and checking if staff wanted to progress further or develop specific skills or training related to their interests. A member of staff told us, "I have regular supervisions. They are supportive and any problems I will go straight to management, at any time. We don't have to wait for a supervision for support. Nothing is too much trouble. I've never had such a good manager, they have really helped me so much, very supportive, they are remarkable."

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to maintain and improve their independence by planning, preparing and cooking meals for themselves and others living at Pear Tree House. There was a rota to show what meals would be prepared by each person on a given day. One person told us, "I like pasta and take-aways. I'm not sure what my favourite is, as there are lots."
- People received home cooked, healthy, nutritious meals. People's dietary needs were recorded in their support plans and people were supported to ensure they received good nutrition and hydration. People were encouraged to make their own healthy eating choices. This helped to maintain and improve their health and sense of well-being.
- A relative told us, "We've had discussions about meals. If [person] doesn't like something they tend to eat the same thing quite a lot, but then again, they are an adult, it's their choice. They cook a few days a week which is really good."
- Staff understood people's dietary needs and ensured these were met. Where nutritional needs had been assessed, clear guidelines were in place for staff to follow.

Adapting service, design, decoration to meet people's needs

- The environment reflected the homely, friendly atmosphere of the service. People had their own bedrooms with en-suite bathrooms. Bedrooms were highly personalised and decorated to people's individual taste. Shared communal areas were bright and comfortable which helped provide a warm, cosy atmosphere.
- The registered manager told us about 'Project Home'. This was a scheme they were piloting to ensure Pear Tree House was as homely and comfortable for people as possible, removing any visible signs of a standard care home. This meant people could live in an environment that was truly homely without the need for posters, signs and guidance documents on display. The process covered many stages including; the language staff used when at Pear Tree House, the overall environment, recruitment of staff, Pear Tree House values and aiming to go to a paperless system to reduce the amount of paper and clutter in the home. The goal of project home was to deinstitutionalise the environment, if successful the provider planned on rolling project home out to their other homes, where appropriate.
- A health and social care professional commented, "The manager is driven by a desire to make the service as homely as possible and strives to make the environment as much like a normal home as possible. She appears to be leading the organisation in this respect and is developing and sharing some excellent best practice ideas."

Supporting people to live healthier lives, access healthcare services and support; Staff working with other

agencies to provide consistent, effective, timely care

- The service worked collaboratively with external healthcare professionals and specialists. A range of professionals were involved in assessing, planning, implementing and evaluating people's care and treatment to ensure people got the right healthcare. Records reflected this was the case for ongoing health issues and emerging issues.
- People had monthly observations and health checks which included; weight, blood pressure, pulse and temperature. The registered manager told us this information had been really useful for GP's and health care professionals if people experienced changes in their health needs.
- A health and social care professional told us, "I really enjoy visiting Pear Tree House and am confident about the high standard of care evident in the home."
- People received the support they needed to manage their health, including any assistance they needed to arrange and attend appointments with health professionals.
- People received an annual health check as per best practice for people with a learning disability.
- People had 'Pictorial Hospital Passports'. These gave important information about each person, their likes, dislikes and things that were important to them. This information would need to be known if the person transferred to another service such as a hospital.

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.

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 MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA.

- Staff had received training in The Mental Capacity Act 2005 and spoke knowledgeably regarding how it applied to the people they supported at the service.
- Staff worked within the principles of the MCA and sought people's consent before providing them with assistance and support. Care and support records contained details of people's consent for a range of areas which included, personal belongings, medication, house keys, room access, daily observations and money.
- Staff worked closely with people, their families and advocates to support people to understand the COVID-19 pandemic and to obtain their consent for people to receive the COVID-19 vaccine.
- The service fully involved people, relatives and relevant health and social care professionals in decisions involving people health, care and support needs.

Is the service caring?

Our findings

Caring - this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- There was a friendly, relaxed atmosphere at Pear Tree House. People were treated with respect, kindness and compassion and had built trusting, caring relationships with staff. People told us they liked the staff who supported them.
- People approached staff confidently for support and enjoyed spending time with staff, chatting and laughing with them. Relatives spoke very positively about the staff team, comments included, "The staff have been really good at managing and providing emotional support...they deal with it all very well" and "Everyone is very supportive of each other and that is down to the staff. They are supportive and caring... there is space at Pear Tree House for everyone to be their own person which is very important."
- Staff spoke passionately about the people they supported at Pear Tree House. They spoke knowledgeably about each person, explaining people's likes, dislikes and what was important to them so they could provide the very best support for people. Staff told us, "I love it here...I'm really proud of Pear Tree and we are very successful at what we do", "It's a lovely place to work, I love my job. I really enjoy making a difference for people. It's so much more than a job, supporting them to achieve their potential and gaining their trust, it's really rewarding."
- The service took a person-centred approach to care and support. Staff were respectful about the people they supported and had completed training on equality and diversity. People's care plans and support records set out aspects of their characteristics, beliefs and preferences to ensure their equality and diversity were respected.

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

- People were supported and encouraged to express their views about how they received their care. They were involved in day to day decisions and had control over their daily routines. A health and social care professional said, "The staff all genuinely care about the young people, offering emotional support and encouragement in a safe environment."
- Staff listened to people's worries, concerns and views and ensured their decisions and choices were respected. People were empowered to make decisions, staff understood this was very important to people. A relative told us, "They let me know if any problems. We are all working together to consciously treat him independently, as he has got older. They are getting the balance of this well." Another relative said, "They recognise what is important to him and involve him in decisions, which is so important."
- Care and support plans included background information about people's personal history and their known routines, activities and hobbies. This meant staff were able to support people in ways they preferred.
- Support plans considered people's disabilities, age, gender, relationships, religion and cultural needs.
- There were fortnightly house meetings where people were given the opportunity to share information that

was important to them and put forward their views, preferences and ideas.

Respecting and promoting people's privacy, dignity and independence

- Staff understood the importance in respecting people's rights to privacy and dignity and this was supported throughout people's care and support records. Staff promoted person-centred values and ensured dignity was a key theme throughout the service.
- Staff were skilled at recognising when someone was feeling anxious or becoming agitated. They correctly followed specific therapeutic interventions, as covered in people's care and support plans, to help the person feel calm and relaxed again.
- Staff actively promoted people's independence and people were encouraged to set themselves achievable, realistic goals to work towards.
- People held their own key fobs for their bedrooms which promoted their independence and privacy. Staff respected people's bedrooms as their private space, seeking permission before entering.
- Staff spoke knowledgeably about respecting people's dignity and privacy. Personal information was kept secure and staff understood the importance of maintaining secure documents and care records to ensure people's confidentiality was maintained.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated 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

- The service and staff demonstrated an individual, person-centred approach which was reflected in people's care and support plans. Throughout the inspection we observed staff had an excellent understanding of people's needs and provided care and support accordingly.
- A health and social care professional told us, "Issues and concerns are managed efficiently. Recommendations are always responded to promptly and communication is good."
- Through the ongoing use and knowledge of the positive behaviour support programme, staff were able to identify and implement clear coping strategies for people when their anxieties increased. Staff recognised people's triggers and were quick to provide encouragement, reassurance and positive interventions for people. This allowed staff to effectively manage people's sense of wellbeing and reduce the risk of emotions escalating.
- Relatives praised the staff team, highlighting the achievements people had attained. A relative told us, "[Person] is more independent and has started to trust other people, we are really, really delighted. Pear Tree in a nutshell is all about feeling independent, really helping and letting [person] realise they are not being dictated to. They are empowered and have their own choices, it's important they are in control." Another relative told us, "[Person's] independence has come on hugely...it's brilliant. We have seen such a huge improvement, [person] is now ready for the next steps and is ready to go forward."
- People's care and support plans were detailed, informative and provided clear guidance for staff. Care and support plans were regularly reviewed and reflected people's physical, mental and social needs. These plans focussed on promoting people's independence and supporting them to achieve their agreed goals as well as how they preferred their care and support to be given.
- People, relatives and staff told us communication was good throughout the service. Staff shared information appropriately whilst respecting people's privacy. A member of staff told us, "Communication is good, we have an open dialogue which is very supportive."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service complied with the Accessible Information Standard (AIS). People's care plans clearly documented their preferred method of communication. Staff communicated in ways that suited each individual. Where required people had access to clear pictorial plans and guidance documents.
- We observed people and staff communicating effectively together throughout the inspection.

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 encouraged and supported to see their family and friends regularly. Staff were committed to ensuring people lived their best life. Relatives spoke positively about the support they had received from the entire staff team. One relative told us, "They are all so supportive and caring. They are fabulous at dealing with the different needs of everyone and how very different all the young people are... They have been so supportive of us as well."
- When COVID-19 restrictions would allow, people were supported to lead active lives and were encouraged and enabled to pursue hobbies and a range of activities both in the home and in the wider community. These included playing musical instruments, watching films, bowling, sensory circuits, gaming on computers, independent walks, listening to music and creating videos.
- People received support and learning around key life skills which included doing their own personal care such as brushing their teeth, showering and choosing their clothes for the day. They also completed household tasks such as sorting their washing, tidying and cleaning their bedroom. Staff supported people to learn independent life skills such as shopping, cooking, managing a budget and independent travel.

Improving care quality in response to complaints or concerns

- The service had a clear complaints policy and process in place. This ensured people were supported to make complaints and encouraged to put forward their views and concerns as necessary. This promoted an open, supportive culture.
- Complaints had been fully investigated, analysed and reviewed with clear actions taken and all relevant parties informed of the outcome.
- Relatives told us they knew how to complain. One told us, "I've not had to complain, but if something is wrong I e-mail the staff then forward it to the registered manager if needed." Another relative said, "I know how to complain, and I know they would listen to me".

End of life care and support

- At the time of the inspection the service was not supporting any one with end of life care.
- People were encouraged to think about and discuss what they would like to happen at this stage of their lives. People's wishes had been respected and staff had worked closely with people, supporting them to write an end of life plan if they wished.

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.

This is the first inspection for this newly registered service. This key question has been rated 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; and how the provider understands and acts on duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- Staff, relatives and health and social care professionals overwhelmingly told us they felt the service was well-led, with an open, honest and supportive culture and a clear management structure in place. Praise for the registered manager was plentiful and comments from relatives included, "[Person] is particularly keen on how the registered manager has sorted things. She is held in high esteem and [person] trusts her judgement", "The registered manager has been amazing. She listens and we talk through situations together, then she actions them", "I'm a big believer it all comes from the top. The registered manager is outstanding, phenomenal... [Person] was listened to and encouraged and supported, it was fantastic. The registered manager came to talk with us and managed the situation very well, it all comes from her... she especially knows [persons] needs so well. They totally know how to support [person]."
- A health and social care professional told us, "I have been very impressed with the leadership and management at the home and find that staff talk positively about their experiences of working in the home consistently... The culture and ethos in the home is positive."
- Staff told us the management team operated an approachable, open door policy and they were always available for advice and guidance. A member of staff said, "I think it's amazing. Pear Tree House is so person-centred, I love it. An excellent staff team that's quite close knit, what they do for the students is amazing, always listen to the people and make time for them." Another member of staff told us, "I feel very supported, we have absolutely amazing support. The registered manager is one of the best managers I've ever worked with. I have a lot of respect for her and she is really good."
- The registered manager and provider understood their responsibilities to be open and transparent if anything went wrong. Staff spoke openly about the values and ethos of Pear Tree House. A member of staff said, "Everyone is happy to speak up at team meetings, we are asked our opinions and we are totally involved, it's more like a home. We are making the changes and improvements are all part of it, makes us feel much more valued."
- There was a clear process to report, review and analyse incidents and accidents. The provider acted in line with their duty of candour.

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

- Relatives, staff and health care professionals spoke positively about how the service was managed. A health and social care professional told us, "The managers have been consistently in post since the home

opened. They are committed and forward thinking. The team talk highly about them and changes are well received." A relative said, " The registered manager has been amazing. She listens and we talk through situations together, then she actions them".

- There were effective systems in place for the registered manager and provider to oversee Pear Tree House and monitor the quality of service provided. There was a process of continual improvement and quality assurance with a variety of audits completed to ensure the quality of the provision was maintained.
- Staff were confident in the quality of care, support and guidance they were able to offer people which gave a strong focus on person centred, individualised care for people. Staff felt very well supported, valued and respected.
- Providers are required to notify CQC of significant incidents and events. We reviewed the notifications the service had completed. Two of these had not been sent to CQC as required by the regulations. We discussed our findings with the registered manager who explained they had been waiting for further information and had not realised they needed to be sent straight away. These notifications were then completed and sent to CQC immediately during the inspection.
- Staff told us team meetings provided a valuable time to discuss lessons learned and different ways of helping and supporting people. Staff viewed team meetings as supportive and helpful.

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

- There was a system of quality assurance questionnaires in place for obtaining the views of the service from people, staff and relatives. Surveys had been positively completed by all. Comments from relatives included, "We are more than happy with [persons] transition to Pear Tree House at this challenging time, thank you very much." The questionnaire asked staff to sum up Pear Tree House in three words, comments included, "Caring, amazing, homely, supportive, challenging and great." Relatives told us they were regularly asked for their views on the service and felt fully involved with the care of their relative.
- People were given the opportunity to attend regular house meetings. The house meetings gave people an opportunity to put forward their views and raise any concerns they had. People's views and requests were listened to and acted upon.
- Staff team meetings were held regularly and provided staff opportunities to discuss all aspects of working at Pear Tree House. Staff told us they felt valued, were always respected and their views listened to. A member of staff told us, "We can put forward our views, it's very open and honest and the meeting minutes are all printed up so anyone can read them."
- The service worked collaboratively with all relevant external stakeholders and agencies. Staff told us the support and guidance they had received had made positive impacts on the lives of the people who lived at Pear Tree House.
- When changes to people's health needs or conditions were identified, appropriate and timely referrals for external professional support were made.
- Health and social care professionals confirmed there were good working relationships with the service. A health and social care professional said, "The manager and deputy both work well with me and are keen to hear any ideas for improvement, striving for development."