

Four Seasons (Bamford) Limited

Holly Court Care Home

Inspection report

8 Priory Grove
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Salford
Greater Manchester
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Tel: 01617080174

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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

Holly Court Care Home is registered to provide personal care and accommodation for up to 25 adults. At the time of the inspection there were 24 people residing at the service. The home is situated in a residential area of Salford. It specialises in care for older people and people with dementia.

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

People and their relatives told us they felt safe. The provider had effective safeguarding procedures and staff felt confident raising concerns. People told us their medicines were being managed safely and comprehensive assessments of need and care plans were undertaken. Feedback about the service from people and their relatives was positive.

The environment was clean, welcoming and well maintained. People told us staff were kind and caring and treated them with dignity and respect. 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.

Staff told us they enjoyed their jobs and felt supported by the current management team. Audits were taking place to ensure staff provided people's care safely and in the way that they preferred. The registered manager had a visible presence and had a good oversight of people's needs.

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

Rating at last inspection

The last rating for this service was good (published 25 July 2017)

Why we inspected

This was a planned inspection based on the previous rating.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Holly Court Care Home

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by an inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Holly Court Care Home is a "care home." People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided and both were looked at during this inspection.

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 unannounced.

What we did before the inspection

Before our inspection we reviewed all the information we held about the service and completed our planning tool. This included notifications the provider had sent us. A notification is information about significant events which the provider needs to send to us by law. We also contacted the local authority to seek their views about 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.

During the inspection

We spoke with seven people who used the service and three relatives about their experience of the care provided. We spoke with six members of staff including the registered manager. We reviewed a range of records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed. We also looked around the premises to make sure they were safe and hygienic.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe. Family members felt reassured their relatives were safe living at Holly Court Care Home. One person told us, "I do feel safe here, yes."
- Staff received safeguarding training and had access to relevant information and step by step guidance about protecting people from harm. Staff understood what was meant by abuse and were confident about how to report safeguarding concerns.
- The manager kept a record of safeguarding incidents that had occurred. Incidents were dealt with appropriately and action was taken to minimise future incidents occurring.

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

- Risks to people's health, safety and wellbeing were managed and measures were put in place to reduce or prevent these risks. The registered manager kept these under review and updated when required to ensure people's safety.
- The service managed risk effectively. The registered manager had systems to record and review accidents and incidents. Accidents and incidents were investigated and monitored and actions were put in place to minimise future occurrences. Lessons learned were shared to improve the service and reduce the risk of similar incidents occurring in the future.
- The service had effective infection control procedures. People were protected from the risk of infection and staff understood their roles and responsibilities in relation to infection control and hygiene. The service had plans in place to manage risks and followed guidance.

Staffing and recruitment

- Staffing levels were safe. Staff told us they had time to care and we observed staff had a visual presence in the communal areas. Our observations confirmed there were enough staff on duty to meet people's needs. One relative said, "The care is smashing here, really good. It's the same staff all the time. I've never seen any agency staff."
- Recruitment was safe and well managed. The manager completed all appropriate checks before new staff commenced their employment.

Using medicines safely

- Medicines were managed safely. People received their medicines when they should.
- Staff responsible for administering medicines were trained to manage medicines safely. We observed people received their medicines safely and medicine administration records (MARs) had been completed appropriately.

- Staff confirmed that they received annual competency checks.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Staff completed assessments of need and care plans prior to people receiving a service.
- Staff regularly reviewed and evaluated care plans. People's choices and preferences had been taken into consideration and care and support was provided in accordance with people's wishes.
- Staff were aware of good practice guidelines and used them to support the delivery of care. People confirmed that they were involved in the planning of their care.

Staff support: induction, training, skills and experience

- Staff told us they received an appropriate induction and received training to confidently carry out their role. They told us they felt supported by the management and had the appropriate skills and experience to support people effectively.
- People felt the staff that cared for them were skilled. A relative told us, "My sister is so impressed so far that she has bought them a four-slice toaster, a kettle and all these new place mats as a thank you for how they care for Dad."

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

- People were supported effectively to maintain a balanced diet. People told us they enjoyed the food. One person told us, "There's plenty of food. They ask if you want more, as well. I had three eggs for my breakfast today. It's a lovely cooked breakfast they do."
- There was a sign near the entrances of the units saying, 'if you are bringing in food for your relative, please check with staff that it fits in with their dietary requirements. You may be doing more harm than good.' This demonstrated that the service ensured people's dietary needs were not being compromised.
- Staff made referrals to external agencies for support and guidance as appropriate.

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

- People had access to appropriate healthcare and staff worked with other agencies to make sure people's healthcare needs were met.
- People told us they had access to outside professionals should they need it. We saw evidence in care files to show professionals had been involved in people's care and referrals had been made to a range of health care professionals.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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. Where people may need to be deprived of their liberty to receive care and treatment in their own homes, the DoLS cannot be used. Instead, an application can be made to the Court of Protection who can authorise deprivations of liberty.

We checked whether the service was working within the principles of the MCA. The service was complying with the principles of the Mental Capacity Act 2005.

- Staff had received training in the MCA. The service was following the principles of the MCA. We saw evidence of mental capacity assessments which were decision specific and best interest meetings taking place.
- We observed staff seeking consent from people. We overheard one staff say, "If it's okay, I'm just going to take you to the table for lunch."

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant 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

- People were well treated and supported. People told us staff were caring. One person said, " Staff are in the main very, very good."
- Everyone we spoke with told us they were well treated and respected.
- We saw several thank you cards and compliments praising the staff team, this informed us staff were kind and caring.

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

- People and their families were encouraged to express their views and were consulted about their care. They told us they felt listened to.
- Relatives felt their family members were well cared for and were involved in decisions. One family member told us, "She [relative] has been here around three months now, we did look at some other places in the area, but this was the one we thought would best suit her needs and so far, it is working out really well. She has settled and the team have been great."
- People were invited to give feedback about the service and their views were analysed.

Respecting and promoting people's privacy, dignity and independence

- Staff were kind and caring and treated people with dignity and respect. A relative told us, "They do seem a caring team and I'm glad we found this place for [relative]."
- Staff promoted people's independence and respected their wishes. One person told us, "The staff will bring me out for a cigarette when I want one. They stand out here and wait for me in all weathers."
- The provider had policies in place to guide staff around the of the importance of treating people equally and ensuring their rights were respected.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Staff planned people's care to ensure their needs were met effectively. Care plans were detailed and contained specific information about their individual needs and preferences. However, we noted that strategies around supporting people with behaviours that challenge were not in place. We discussed this with the registered manager who agreed to address this.
- Staff treated people in a person-centred way and people told us their care plans were reviewed regularly.

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 carer's.

- The registered manager was aware of the AIS and how information could be improved, such as ensuring service user guides were available in bold print and large print.
- People's communication needs had been assessed and support required was documented.

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 develop and maintain relationships. They told us they were happy with the activities on offer. One person said, "I do sing a bit and they had entertainment on last week and he asked me to get up and sing. I was too shy to stand up and sing but I did a bit sat down! They take me along to the pub as well. I just have one or two but it's nice of them to take me out." Another person said, "Oh yes, there's plenty to do here. In summer we do a lot outside, we have barbecues and they do try and keep us busy and entertained."
- Staff also supported people to maintain relationships with families and friends as much as possible and there was local community involvement. One relative told us, "There are quite a lot of activities. They had an Elvis impersonator on and they get up and have a dance. Some choirs have been in and the young children."

Improving care quality in response to complaints or concerns

- The service was responsive when complaints or concerns were raised. People told us they knew how to raise concerns. We looked at the management of complaints and could see that the management addressed these effectively. People and relatives told us they could speak to the registered manager if they had any concerns.

End of life care and support

- The service had a policy and procedure for end of life care and staff had received appropriate training. We saw thank you cards expressing gratitude from families, for the compassionate way staff had supported their loved ones at end of life. One person told us, "[Relative's] end of life care was really good. They really went the extra mile to make him comfortable."

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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; 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

- There was an open culture at the service. People received a quality service and were complimentary about the management. People felt the service was well-led. One person said, "The manager is very, very, easy to talk to. She is always coming over and she is lovely to everyone."
- Staff told us the management was approachable and they felt well supported. They told us there was an open-door policy.
- The management team were approachable and friendly, and they worked effectively together as part of a team. One relative said, "I've no complaints so far. Sometimes [relative] gets upset when I'm leaving and wants to come with me but [registered manager] and the team do help by distracting her and I'll slip away. They are all very helpful, in all ways."
- The service understood the duty of candour and were aware of their responsibilities.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements.

- Managers were clear about their role and had a good understanding of quality performance. The service was transparent and appropriate notifications to safeguarding and CQC were made by the manager.
- We saw evidence of staff supervisions and team meetings taking place.
- We saw evidence of audits taking place which meant they could identify what they were doing well and what they may need to improve. The registered manager acted to address any shortfalls following audits to improve the quality of the service delivered to people.

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

- The service engaged and involved people and families and worked in partnership with other agencies. The service had an activities newsletter and was keen to share information with people.
- The provider carried out service user and staff satisfaction surveys to gain people's views of the support being provided.
- Staff told us they enjoyed their jobs, felt well supported and that it was a good place to work. One staff told us, "The manager is approachable, if anyone has any issues, either relatives or staff, she will do her upmost. She will come back to you."

Continuous learning and improving care; Working in partnership with others

- The provider used continuous learning to improve care. We saw learning shared with the staff team. The registered manager explained that step by step guides had been put in place to increase staff skills, in response to a safeguarding.
- We saw evidence of accidents and incidents that had been documented and actions taken. The registered manager analysed these and acted to reduce the risk of them happening again.
- The service worked well with the local authority and had developed good relationships with professionals.