

Williams & Spenceley Limited

Howlish Hall Residential Care Home

Inspection report

Howlish
Coundon
Bishop Auckland
County Durham
DL14 8ED

Tel: 01388741792
Website: www.howlish-hall.co.uk

Date of inspection visit:
27 August 2020

Date of publication:
21 October 2020

Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service well-led?

Good 

Summary of findings

Overall summary

About the service

Howlish Hall Residential Care Home is a residential care home providing personal care to 27 people aged 65 and over at the time of the inspection. The service can support up to 40 people.

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

People told us they were safe living at Howlish Hall Residential Care Home. Staff understood the procedures to keep people safe and knew how to report concerns. Previous safeguarding concerns had been referred to the local authority and investigated.

People and staff gave positive feedback about staffing levels. The home was clean when we visited. Health and safety checks and risk assessments were completed to maintain a safe environment. Incidents and accidents had been investigated and action taken.

Staff confirmed they received good support and had access to the training they needed. People gave positive feedback about the meals they received. Staff supported people to access healthcare services when needed.

Staff gave very positive feedback about the new manager. The provider had a structured approach to quality assurance. A range of checks were completed and these were effective in identifying areas for improvement. People and staff had opportunities to share their views about the home.

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

Rating at last inspection and update: The last rating for this service was requires improvement (published 26 March 2019) and there were multiple breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 26 March 2019. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment and staffing.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions safe and effective which contain those requirements, in addition to the well-led key question.

As part of CQC's response to the coronavirus pandemic we are also conducting a thematic review of infection control and prevention measures in care homes. The Safe domain also therefore contains

information around assurances we gained from the registered manager regarding infection control and prevention.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service remains requires improvement. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Howlish Hall Residential Care Home on our website at www.cqc.org.uk.

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?

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Howlish Hall Residential 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.

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

Inspection team

One inspector carried out this inspection.

Service and service type

Howlish Hall Residential Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 did not have a manager registered with the Care Quality Commission. A new manager had recently started working at the home. They had started the process to become the registered manager.

Notice of inspection

We rang the manager on the day we were visiting to give short notice of the inspection. This was to ensure we could visit the home safely.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and reviewed recent feedback from a survey. We spoke with three members of staff including the manager and care workers. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records, including three people's care records. We also looked at a range of other records relating to the management of the service. We also asked the provider to send us information electronically, we received this information on 8 September 2020.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- The service managed risks safely. Where potential risks were identified, risk assessments were carried out to help ensure the environment and equipment were safe for people.
- The provider had procedures to ensure people continued to receive care in emergency situations. Personal emergency evacuation plans (PEEPs) were completed for each person using the service.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective systems to help keep people safe. People said they felt safe living at the service.
- The provider dealt with safeguarding concerns thoroughly; previous concerns had been referred to the local authority and fully investigated.
- Staff understood the safeguarding and whistle blowing procedures. They confirmed they wouldn't hesitate to raise concerns if needed.

Staffing and recruitment

- There were enough staff on duty to meet people's needs. People said staff responded quickly when they needed help. One person commented, "If I ring, two minutes and they are there. Nothing could be better for me."
- Staff were visible around the home, they supported people without delay when people needed assistance.
- The provider regularly checked staffing levels to ensure they were at a suitable level.
- There were no concerns with the recruitment of new staff.

Using medicines safely

- Medicines were managed safely. Staff were trained and assessed as competent before giving people medicines.
- Staff kept accurate records to confirm the medicines people received.
- The manager monitored care staff to check they followed the provider's medicines management

processes.

Preventing and controlling infection

As part of CQC's response to the coronavirus pandemic we are also conducting a thematic review of infection control and prevention measures in care homes. The Safe domain also therefore contains information around assurances we gained from the registered manager regarding infection control and prevention.

How well are people protected by the prevention and control of 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.

Learning lessons when things go wrong

- The manager monitored incidents and accidents to ensure appropriate action was taken.

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 requires improvement. At this inspection this key question has now improved to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

At our last inspection the provider had failed to ensure staff were suitably supervised and trained. This was a breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- Staff were well supported and accessed the training they needed. One staff member said, "I do feel [the manager] supported us. I feel very supported."
- Supervisions, appraisals and training were up-to-date.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were fully assessed to identify their care needs. This included discussing people's preferences relating to cultural, religious or social needs.

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

- Staff supported people to ensure they had enough to eat and drink.
- People gave positive feedback about the meals they received. People also said any meal suggestions they made were acted on immediately. One person told us, "The food is good. I suggested we have pancakes, they are not just for pancake day. We then had them for tea."
- Some people had been referred to health professionals for additional support with eating and drinking. Their recommendations were included in people's care plans as a guide for staff.

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

- People's care records summarised important information, to be shared with professionals when they accessed other services.
- Staff supported people to access external healthcare services when required.

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

- The home was suitable to meet the needs of the people living there. For example, there were themed areas and appropriate signage to help people living with dementia orientate around the home.
- People personalised their rooms to suit their preferences and interests.

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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The provider followed the requirements of the MCA. Where required, DoLS authorisations were approved or applied for.
- Staff knew how to support people with a range of needs to make daily living choices and decisions.

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 requires improvement. At this inspection this key question has now improved to 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

- Management and the staff team worked together to meet people's needs. One staff member commented, "The staff team are lovely, we help each other out."
- The service had a positive and welcoming atmosphere. One staff member said, "The home has a homely, family atmosphere."

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

- Staff told us the service had improved since the last inspection. One staff member told us, "Everything has changed, the way the staff work is for the better. [Name] is the new manager, I think she is going to be brilliant."
- People said the manager was approachable and easy to talk to. One person commented, "[Manager] is very nice, she is always out and about."
- The manager was proactive in submitting the required notifications following significant events at the service, such as for incidents and accidents.

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

- The provider encouraged people and staff to be involved and share their views about the service. People and staff could attend regular meetings or participate in surveys.
- The provider recently carried out consultation with people and staff to check on their wellbeing during the Covid-19 pandemic.

Continuous learning and improving care

- The provider had a structured approach to quality assurance, which was effective in identifying areas for improvement.
- The manager had an improvement plan for the home which showed good progress was being made to complete the various actions identified in the plan.

Working in partnership with others

- The provider worked with local commissioners and other professionals to promote good outcomes for people.