

Mrs Ann Mallinson

Holly Bank Nursing Home

Inspection report

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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?

Outstanding ☆

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Holly Bank Nursing Home is a residential care home providing personal care to 12 people at the time of the inspection.

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

At our last inspection we rated the service Good. At this inspection we found the evidence continued to support the rating of Good for the safe, effective, responsive and well-led domains. There has been a change of rating to Outstanding for the caring domain.

People living at Holly Bank benefitted from an exceptionally caring, kind and compassionate service. We received overwhelmingly positive feedback about the quality of care and the management of the service, from both people and their relatives.

Staff promoted a strong person-centred culture, and were motivated to deliver care in such a way that exceeded both the expectations of both the people living at the home, and their relatives.

People were supported by staff who were familiar to them. Many staff had worked at the home for a long time and had forged genuine relationships with both people and their relatives as a result. Staff took the utmost care to provide care and support in a dignified way and with consideration to people's independence.

The ethos of the service was to provide a home from home. Without exception, people told us they genuinely thought of Holly Bank as their own home, some described it as being even 'better than home.' Relatives were keen to tell it was 'a home from home' for their loved one.

The service strived for people to maintain relationships with those who were important to them, relatives told us how they could call in at any time and no matter what time of day or night, were always made to feel welcome.

Staff showed great empathy, not just for the people they supported, but also people's friends and family. Relatives told us that staff were a great source of emotional support and had made their loved one's transition from home to Holly Bank, a seamless one.

Staff fully understood people's preferences, wishes and choices, and people were encouraged and supported to express their views

People were supported to be a part of their local community. The home was situated close to local amenities, such as parks and shops, which staff helped people to access.

People were supported in such a way that allowed them 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 were well supported in their role with appropriate training and supervision. Staff had also received additional training to meet the specific needs of the people they were caring for.

Checks and audits were carried out to determine the quality and safety of the care and support being provided. Risk to people was appropriately assessed and measures were put in place to support people safely, whilst still respecting their freedom.

The registered manager and registered provider had met their legal requirements with the Care Quality Commission (CQC). They promoted person centred care and transparency within the service.

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

Rating at last inspection

At our last inspection, the service was rated "Good." (Report published July 2017).

Why we inspected

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

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 caring?

Outstanding ☆

The service was exceptionally 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 Bank Nursing Home

Detailed findings

Background to this inspection

The inspection

We carried out our inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. Our inspection checked whether the provider was 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

The inspection was completed by one inspector.

Service and service type

Holly Bank Nursing 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

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 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.

During the inspection

We spoke with the registered manager and the home's administrator. We also spoke with eight people who

used the service and ten relatives. We also made observations of care and support throughout the day.

We reviewed a range of records. This included three people's care records and medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with two members of care staff.

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 good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People's feedback and their relatives told us they felt the care and support received by staff was safe. One person told us, "I feel safe here, I feel it's my home." A relative commented, "[Name] couldn't be in a safer place."
- Staff received safeguarding training and had access to a whistleblowing policy. Staff understood how to safeguard people from abuse and how to report any safeguarding concerns.
- The registered manager sent us statutory notifications to inform us of any events that placed people at risk of harm.

Assessing risk, safety monitoring and management

- Control measures were in place providing staff with guidance on how to mitigate any identified risks to people, whilst still respecting people's freedom. Individual risk assessments were carried out for each person and included health, safety and environmental risks.

Staffing and recruitment

- People received care and support by staff who were familiar with their individual needs, preferences and routines. There were enough staff to meet people's needs.
- Full pre-employment checks were completed to help ensure staff members were safe to work with vulnerable people.

Using medicines safely

- Medicines were managed safely and administered by staff who were trained to do so.

Preventing and controlling infection

- Staff received training in infection prevention and control and followed good practice guidance.
- Staff had access to personal protective equipment (PPE).
- The home appeared clean and well maintained. A relative told us, "It's all spotlessly clean here and there are no odours."

Learning lessons when things go wrong

- Any incidents and accidents were reviewed by the registered manager to identify any themes and trends. This helped to prevent reoccurrence in the future and minimise risk to people.

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 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

- People's needs, and choices were assessed, and they received care and support in line with standards, guidance and the law.
- Care and support records evidenced the involvement of people and relevant others such as relatives.
- Records were individualised and contained details of people's preferred routines and preferences.
- Daily notes were recorded by staff which detailed all care and intervention carried out. The service regularly reviewed people's care records with the person and any relevant others, so that any changes in support needs could be implemented.

Staff support: induction, training, skills and experience

- Staff had the necessary knowledge, skills and experience to perform their roles. The service supported staff through inductions, supervisions and appraisals.
- Most staff had undergone additional training to help meet the specific needs of people. For example, staff had developed their understanding of the needs of people living with dementia.
- Staff were competent, knowledgeable and skilled.

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

- Care records contained information on how staff were to support people with any dietary needs and maintain a balanced diet.
- Food was home cooked on the premises and people had access to nutritious meal choices.

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

- People received the care and support they needed. The service referred people to external healthcare professionals where appropriate.
- Staff supported people to attend external appointments where required, this was important for people who wanted an advocate to act on their behalf.

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

- Risk assessments were carried out to check the environment was suitable to meet people's needs.
- People were able to personalise their own rooms. Most people had brought in their own furniture and accessories from home, so that each person's room was unique to them.

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).

- Staff had received training in mental capacity and assumed people had the capacity to make decisions, unless assessed otherwise.
- Staff ensured people were involved in decisions about their care and support. We found recorded evidence of people's capacity to consent to care documented in their support files. Staff asked and explained to people before giving care and support.

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 improved to outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

- Staff treated people as though they were their own family members, and were exceptionally motivated about ensuring people were treated with the utmost kindness and compassion. Staff displayed great empathy for the people they cared for. This level of compassion and empathy exceeded not only the expectations of the people living at the service, but also that of their loved ones. People told us, "I honestly couldn't wish for anything better, this truly is the best home" and "I feel at home here and I like my independence." Relatives told us, "I am completely amazed at how well [Name] has settled here, they have never been so calm, they are happier here than they ever were in their own home" and "[Name] is happier here than being at home." Written feedback from family members was equally as positive; "I love the family feeling at Holly Bank, all the staff are friendly, and nothing is too much trouble, I am confident they [relative] are in the best place" and "The care is exceptional. I can't recommend [the home] highly enough."
- The ethos of the service was to provide 'a home from home'. Without exception, people told us they genuinely thought of Holly Bank as their own home, some described it as being even 'better than home.' Staff took the time to find out about people's backgrounds, including the people who were most important to them. Staff worked with the person and their family and friends to help determine not only their care needs, but their preferences, values and aspirations. Staff knew people's individual needs and preferred routines exceptionally well, as many had worked at the service for a long time.
- Staff displayed a natural and familiar way with people. Staff were consistently polite, courteous and engaged, and were genuinely pleased to be at work. People were treated respectfully and in a dignified way. Staff went out of their way to make time for people. They constantly chatted to people as they went about their work. A relative told us, "Staff don't they see it as a job, it's more than that, it's personal."

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

- Staff used innovative ways to communicate with people and were exceptional at helping people to express their needs, preferences and wishes. For people who were not always able to verbalise their needs, staff took time to ensure those needs were conveyed and understood. For one person who was not always able to verbally express themselves, staff communicated with the person whilst singing. As the person had previously sung in a choir, this not only enabled the person to better understand what was being said to them, but also helped them to communicate by singing back to staff. Staff were able to do this as they took the time to get to know about the history of the person through building up relationships with their family members. Staff used this knowledge to support the person in a way that was completely unique to them and sensitive to their needs. A relative told us, "[Name] really struggles with their communication, but staff have developed a way of knowing their needs."

- People were empowered to maintain their relationships with those closest to them. Staff developed a great understanding of people's social needs by working with the person and their friends and relatives. The service worked hard to maintain any social links people had prior to moving into the service. One person used to make regular trips to visit their partner at the home, when they were no longer able to live independently, the home accommodated the person so that they were able to live a life together as a couple. They told us, "It's just the best place I could wish for here."
- Various organisations such as the school, the local museum, Age Concern and representatives of various religious faiths, visited the home to ensure that people who were unable/unwilling to go out, maintained links with their local community. One person told us, "The highlight for me is the school children coming in."
- There were no restrictions on visitors and people enjoyed free access to their family, friends and community. People were supported to access activities in the community of their choosing, and the service placed great emphasis on people maintaining interests they had previously. One person enjoyed a stroll in the park followed by a beer, this is something they had always done and enjoyed and something they continued with staff support. The service got to know people's strengths and used this knowledge to facilitate activities which were meaningful to them. One person who lived with dementia did not often engage, staff knew the person had enjoyed crosswords and supported the person to complete 'The Times' crossword. The person became animated when shouting out the solutions.
- For people who had no family or friends to speak on their behalf, the service had details of an independent advocacy service. An advocate helps to ensure that the views and wishes of the person are conveyed.

Respecting and promoting people's privacy, dignity and independence

- People were treated with the utmost dignity and respect. These values were the cornerstones of the service and underpinned the care and support provided by every member of staff. One told us, "Everything we do is about what the person wants, dignity and respect are paramount." Staff were recruited not only on qualifications and experience, but on whether they had inner values of kindness, respect and dignity. The registered manager was not afraid to challenge any practices that fell short of this. Because these values were so entrenched in the service, staff were considerate, and supported people in a discreet and dignified manner. People told us they never had to wait for assistance, "As soon as I press the call bell, they are there." There was a sense of calmness and tranquillity at the home, people rarely called for assistance, as staff had such a wealth of knowledge and understanding of people, they often pre-empted their needs.
- Staff showed great tenacity in working towards people's independence and restoring their ability to complete everyday tasks. One person arrived at the service on a pureed diet. With persistence and time, staff tried the person with various soft foods, gradually building up the person's tolerance. The person went on to eat foods with a normal consistency and were provided with finger foods, so they were able to enjoy food independently and in a more dignified manner.
- People's fundamental right to privacy was recognised and respected. People's needs meant they relied on staff for much of their care, support and emotional needs. Staff took great care to provide support in a discreet and dignified manner. People's independence was respected and promoted. At every opportunity, staff encouraged and supported people to direct their own care and support and do what they could for themselves. Even the smallest of tasks empowered people to take control and express their choices.

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 good. This meant people's needs were met through good organisation and delivery.

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

- The service helped facilitate activities for people which were meaningful to them. An activity co-ordinator was employed. They took the time to find out what people had enjoyed doing prior to arriving at Holly Bank. They then used this information to engage people in activities in which people had a genuine interest, to make them as stimulating as possible.
- People had a say in what they wanted to do and enjoyed trips to cafes, the shops and parks. One person enjoyed art and was provided with an easel and paints to continue their hobby. The service had developed a relationship with the local school. This helped to develop inter-generational bonds and people were keen to tell us how much they enjoyed the visits from the children.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People were at the heart of their care and support plans and their individual wishes, needs and choices were considered. Emphasis was placed on care and support being given from the person's perspective.
- People's protected characteristics were recorded such as their religion, culture and sexual orientation.

End of life

- The service offered dignified and compassionate end of life care. The service was accredited to provide end of life care meaning staff had received specialised training and worked in conjunction with other healthcare professionals to ensure people received individualised end of life care and support.
- The service had a dedicated 'reflective garden'. People and staff were able to reminisce about past residents and plant flowering shrubs in their memory.

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.

- Staff supported people who required assistance with reading or completing paperwork in relation to their care and support. Guidance on how best to communicate with the person was recorded in their support plan.
- Important information such as people's care plans and the service user guide were provided in alternative formats to ensure that each person's understanding.

Improving care quality in response to complaints or concerns

- There was an appropriate complaints management system in place.
- At the time of our inspection the service had not received any complaints. People told us they would talk to either the registered manager and staff if they had any issues. One person told us, "I would definitely raise any issues with any of the staff."

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 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

- The culture of the service focused on ensuring people received person-centred, dignified and compassionate care in a home they could call their own that met their needs, values, choices and preferences. These values were promoted by the registered manager and shared and practiced by every member of staff.
- The registered manager demonstrated transparency and presence in the running of the service and was well respected by people, relatives and staff alike. One person told us, "I think the manager is excellent." A relative commented, "[Manager] runs the place really well. They are efficient and dedicated, it's a great place. It's the place I would want to be."

Continuous learning and improving care

- The service was committed to further enhancing the quality of care for the people it supported. The registered manager was keen to further develop relationships with external organisations (such as health care professionals) to help provide better support for people.
 - The registered manager was continually reviewing and learning where possible.
- Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements
- Systems were in place to monitor the safety and quality of the service.
 - Audits identified actions required to ensure full compliance with the provider's objectives and regulations.
 - The prior inspection rating was displayed within the service's premises in accordance with regulatory requirements.

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

- People were encouraged to put their opinions and views forward. Questionnaires were used to gather feedback, people were also able to feed their views back to staff at any time.
- The registered manager held regular staff meetings. Staff told us they felt comfortable to raise any issues or suggestions they had at any time.

Working in partnership with others

- The service worked in partnership with others such as commissioners, safeguarding teams, health and social care professionals and community groups. We saw written feedback from a healthcare professional

who described the home as being "the best I have come across." □

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

- The management team held regular meetings and discussed any incidents. This helped to further drive the quality of the service.
- The registered manager submitted any required notifications to CQC in a timely way.