

PWC Care Limited

# Thorn Hall Residential Care Home

## Inspection report

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Date of inspection visit:  
21 August 2019

Date of publication:  
14 October 2019

## Ratings

Overall rating for this service

Good ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

### About the service

Thorn Hall Residential Care Home is a small care home that is registered to provide support to 11 older people, some of whom may be living with dementia. At the time of our inspection, 11 people lived at the service.

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

The provider had reviewed and updated their systems to address shortfalls in their quality monitoring systems. Audit processes were more robust and allowed the registered manager and the provider to closely monitor the service. Issues were addressed, and appropriate plans were in place until problems could be fully resolved. People were happy with the service provided.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (report published 27 June 2019). We rated well-led as requires improvement, as we found problems with the monitoring of the service.

### Why we inspected

We carried out an unannounced comprehensive inspection of this service on 16 and 17 May 2019. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve good governance.

We undertook this targeted 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 Question Well-Led which contains those requirements.

The ratings from the previous comprehensive inspection for the Key Questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has not changed and remains good. 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 Thorn Hall Residential Care Home on our website at [www.cqc.org.uk](http://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 for those services rated good. 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 well-led?

The service was not always well-led.  
Details are in our well-led findings below.

Requires Improvement 

# Thorn 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.

This inspection was a targeted inspection to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 16 and 17 May 2019 had been made. This report only covers our findings in relation to those requirements.

#### Inspection team

The inspection was completed by one inspector.

#### Service and service type

Thorn Hall Residential 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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be available to support the inspection.

#### What we did before the inspection

We looked at information sent to us since the last inspection such as notifications about accidents and safeguarding alerts. We reviewed an action plan the provider had sent us after our last inspection which set out how they would make improvements. We used all this information to plan our inspection.

During the inspection

We spoke with two people who used the service, two care staff and the registered manager. We reviewed documents relating to quality assurance.

# 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 remained the same. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

At our last inspection, the provider had failed to operate effective systems to assess, monitor and improve the quality of the service. This was a continued breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider completed an action plan after the last inspection to show what they would do and by when to improve their governance arrangements. At this inspection we followed up the action plan and checked whether the provider had made improvements.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17. We could not improve the rating for well-led from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

- Processes to monitor and improve the quality of the service had been reviewed and updated in line with the provider's action plan but needed time to become established. Plans were in place to review the monitoring system annually to ensure it remained fit for purpose.
- People were happy with the quality of the service. People said, "The service is excellent. The staff are very helpful, kind and understanding, they do their very best for us" and "It is good, I can't think of anything they could do to make it better."
- Audits were appropriate for the service. The registered manager had reviewed and updated audits to ensure they accurately reflected the service.
- Audits were completed in line with the provider's schedule. An audit schedule had been implemented to help ensure audits are completed at regular intervals.
- The nominated individual had greater oversight of the service. Processes were in place for the registered manager and nominated individual to review audits every eight weeks, to ensure issues were addressed in a timely manner.
- Contingency plans were in place to mitigate risks if issues could not be resolved during this time. There was a delay in installing radiator covers. However, the registered manager ensured they were turned off to prevent people from being burnt.