

Longfield (Care Homes) Limited

Hollymount Residential and Dementia Care Centre

Inspection report

Hollymount
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Hollymount Residential and Dementia Care Centre is a residential care home and at the time of the inspection was providing personal and nursing care to 31 people aged 60 and over. The service can support up to 38 people in one adapted building.

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

People told us they felt safe and were happy living at the home. Prior to the inspection we had been made aware of recent concerns at the service around safeguarding people. However, the registered manager provided reassurances and had identified common themes occurring and was already in the process of taking action to minimise these risks. Staff we spoke with had an understanding of safeguarding and told us they received appropriate training. The local authority was working closely with the service and had agreed to provide some additional training for staff. Medicines were managed safely and staff had been safely recruited.

Staff received appropriate inductions, support and supervision to enable them to care for people effectively. People told us they enjoyed their meals and people were being offered choices. Improvements to the premises were taking place, particularly with regard to the bathrooms. However, we advised further consideration be given to people for adaptations, for people living with dementia and for promoting more stimulation.

People were positive about the leadership of the service and staff were complementary about the manager. There was a full schedule of audits in place and it was clear the provider was supportive and involved in the operation of the home. People had been consulted and quality surveys had taken place. The registered manager agreed to collate these results and formulate action plans, in addition to re-implementing more regular resident and staff meetings.

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.

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 good (published 30 July 2021)

Why we inspected

The inspection was prompted in part due to concerns received about how the service was managing safeguarding events. A decision was made for us to inspect and examine those risks.

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. This included checking the provider was meeting COVID-19 vaccination requirements

We received concerns in relation to safeguarding people. As a result, we undertook a focused inspection to review the key questions of safe, effective and well-led only. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe, effective and well led sections of this full report.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained the same, good, based on the findings of this inspection.

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

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 ●

Further information is in the detailed findings below.

Is the service effective?

Good ●

Further information is in the detailed findings below.

Is the service well-led?

Good ●

Further information is in the detailed findings below.

Hollymount Residential and Dementia Care Centre

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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This included checking the provider was meeting COVID-19 vaccination requirements. 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 was carried out by two inspectors.

Service and service type

Hollymount Residential and Dementia Care Centre is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Hollymount is a care home without nursing care. 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 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. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with seven people who used the service about their experience of the care provided. We spoke with four staff, a visiting professional, the registered manager and assistant deputy manager.

We checked the environment and observed how staff cared for and supported people. We reviewed a range of records. This included three people's care and medication records. We looked at three staff files in relation to recruitment. 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.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living in the home and were happy living there. One person said, "It's a very pleasant place to be, very knowledgeable people who can sort things out." Another person told us, "The staff are very, very helpful, I have no issues, no worries or concerns."
- Concerns had been raised around the number of recent safeguarding events at the service and the local authority had convened meetings to discuss these. The registered manager had done some extensive work around this and had identified themes and patterns. We were assured by both the registered manager and the provider that these would be fully investigated.
- Staff had received training in safeguarding adults. Staff we spoke with demonstrated an understanding of safeguarding. However, we were made aware that of one incident where a staff member had not effectively documented skin integrity checks. We raised this as an issue with the registered manager who agreed to ensure all staff were clear around their responsibilities.

Assessing risk, safety monitoring and management

- The provider had systems in place to assess and manage risks in the service. We saw evidence of risk assessments in relation to moving and handling, choking risks and managing people's behaviours. Care records indicated that these were reviewed regularly.
- Maintenance records and safety checks were taking place and risk assessments relating to the environment were also in place.

Staffing and recruitment

- There were sufficient staff on duty to meet people's needs in a timely manner. One person said, "Everyone looks after you and makes sure you are well and comfortable." Another person said "The staff are brilliant, it's lovely. The staff treat me with respect." Staff confirmed there were enough staff on each shift and told us, "We don't feel like we are rushing around."
- We looked at staff recruitment files and saw that staff were recruited safely. Pre-employment checks were taking place prior to staff taking up employment at the home.

Using medicines safely

- Medicines were safely managed. Staff responsible for administering medicines were competent and had received appropriate training.
- Medicine administration records were completed appropriately and where people needed their medicines given covertly (i.e. in food or drink they were unaware of) there was appropriate documentation and guidance.

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.

Visiting in care homes

Measures were in place for safe visiting in line with government guidance. Temperature checks and lateral flow tests were carried out prior to entry to the home and PPE and sanitizers were available for visitors to use.

Care homes (Vaccinations as Condition of Deployment)

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19, unless they have an exemption or there is an emergency. We checked to make sure the service was meeting this requirement.

The Government has announced its intention to change the legal requirement for vaccination in care homes, but the service was meeting the current requirement to ensure non-exempt staff and visiting professionals were vaccinated against COVID-19.

Learning lessons when things go wrong

- The registered manager had learned lessons from incidents where things had gone wrong. This learning was recorded, and practice shared with the staff team, to minimise the risk of future incidents.

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 our last inspection we rated this key question good. At this inspection the rating for 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

- The provider had systems in place to ensure people received the appropriate care and support. We saw evidence of pre-admission assessments, where the registered manager had gathered detailed information about people before they moved into the service. This ensured that the service could meet people's individual needs effectively.
- The home used an electronic care planning system. Staff accessed this through handheld devices to document the care they were providing to people. We spoke to one person who told us they had been sitting in an uncomfortable chair for several hours. We checked to see when the individual had last received support to change position and could see that the electronic monitoring system had flagged this as an issue. We raised this with the registered manager who responded promptly and ensured the person was moved to a more comfortable place.

Staff support: induction, training, skills and experience

- Staff told us they felt well supported by the registered manager and that she was visible and approachable within the service. They told us they had received appropriate inductions and training and were pleased that face to face training was resuming.
- In addition to the provider led training, the local authority had supported the service and offered training around moving and handling, safeguarding and mental capacity.
- Staff told us they received effective supervisions and appraisals and that things had improved at the service under the current registered manager.

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

- Staff supported people to maintain a healthy and balanced diet. People told us they enjoyed the meals and there was a calm relaxed atmosphere in the dining room. Menus were displayed and we observed people were being offered choices and being supported effectively with their meals.
- We saw evidence of people's nutritional needs being assessed and evidence of referrals being made to appropriate professionals.

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

- Staff worked with health and social care professionals to ensure people were supported to live as healthy lives as possible. Although there had been some recent concerns raised by professionals, we spoke with one visiting professional who told us that improvements had been made and that communication had improved

recently at the service.

- We saw evidence of oral health care plans in place and noted that people were regularly seen by a visiting hygienist at the service.

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

- The provider had made some improvements to the environment to meet the needs of people in the home, including those living with dementia and agreed to further develop this so that people were more stimulated.
- Improvements to bathrooms were in the process of being carried out. A new spa bath had been installed and there were further plans to adapt other bathrooms. Maintenance issues within the home were also addressed promptly and effectively.

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 our last inspection we rated this key question good. The rating for 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 registered manager worked hard to maintain a positive culture at the service. She was open and transparent during the inspection and told us how she starts early in the morning, so that she can maintain regular contact with the night staff. It was clear that she knew the individuals at the service well and engaged well with people and their families. She talked about her achievements, future plans for a cinema room and how she had improved morale at the service.
- People who lived in the home were positive about the quality of care provided in the home. One person told us, "It's great for me, I like it. The staff are very nice."
- Processes were in place to ensure people's care was regularly reviewed, and any changes were acted upon in a timely manner.

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; Continuous learning and improving care

- The service had procedures in place informing staff what to do in situations when something goes wrong with someone's care. The registered manager and the provider had learned from accidents and incidents that had happened at the service and had put measures in place, to prevent the risk of them happening again.

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

- People were very complimentary about the registered manager and the staff team. One person told us, "We don't have resident meetings, as such, but we can raise any issues if we wanted to and I am positive they would take action." Another person said, "The staff team are brilliant, it's lovely here."
- Staff told us they had confidence in the leadership of the service. One staff said, "The registered manager is approachable, very visible and always available for us. Things have improved since [registered manager] has arrived, we have faith in her and she has done well. The provider visits regularly too."
- The registered manager understood their responsibility to meet regulatory requirements and had submitted required notifications to CQC.
- The provider had a system of regular audits to ensure the quality and safety of the service.

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

- People told us they were consulted about matters within the home and we saw evidence of "you said, we did," feedback from people. People had said they wanted Spanish and Greek nights and during our inspection we observed a Mexican themed day, that people were enjoying.
- Staff told us that they could contribute ideas and we saw that there was a suggestions box in the home. However, regular resident and staff meetings had not always been taking place and this was raised as an issue with the registered manager who assured us that these would be re-instated on a more regular basis.
- Quality surveys had been carried out although the results had not yet been collated and formulated into action plans. The registered manager told us that she would ensure this was actioned.

Working in partnership with others

- The registered manager and provider worked in partnership with other professionals and agencies to help ensure people received the care they needed. They had welcomed the additional support received from the local authority and were keen to continue to keep improving relationships with both health and social care professionals.