

# Milewood Healthcare Ltd

# Holgate House

## Inspection report

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York  
North Yorkshire  
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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

Holgate House is a care home providing personal care for up to 30 people who have a mental health support need, or a learning disability and/or autism. They support older and younger people. At the time of our inspection 20 people lived at the service.

### People's experience of using this service

We received positive views from people about the support provided. Care and support was tailored to each person's needs and preferences. People were fully involved in developing and updating their planned care.

People and staff told us the registered manager was approachable. All feedback was used to make continuous improvements to the service. The provider had systems in place to safeguard people from abuse and staff demonstrated an awareness of safety and how to minimise risks.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice. People received their medicines on time and their health was well managed.

People were supported to take positive risks and be independent. Staff knew people's likes and dislikes well and were effective at managing risk.

People were supported with their communication needs and staff demonstrated effective skills in communication. Recruitment checks were in place to ensure staff were suitable to work at the service. Staff were skilled to meet the needs of people.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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 (published 23 June 2017).

### Why we inspected

This was a planned inspection based on the previous rating.

### 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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

# Holgate House

## 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

One inspector carried out this inspection.

#### Service and service type

Holgate House 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 CQC. 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. The registered manager was on leave when the inspection was carried out.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

We reviewed information available to us about this service. This included details about incidents the provider must notify us about, such as abuse. We sought feedback from the local authority. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

#### During the inspection

We spoke with the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also spoke with one senior, four support workers and five people using the service. We looked at two people's care records in full and three people's records in part. We also looked people's medication administration records and a selection of documentation about the management and running of the service. We looked at recruitment information for two members of staff, staff training records, policies and procedures and records of complaints. We also spoke with a visiting social care professional.

After the inspection

We continued to communicate with the nominated individual to verify information discussed during the inspection.

# 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 were safeguarded from the risk of abuse. Staff demonstrated a good awareness of safeguarding procedures; they knew who to inform if they witnessed or had an allegation of abuse reported to them.
- The registered manager knew to liaise with the local authority if necessary.

Staffing and recruitment

- There were enough staff available to meet people's needs.
- Checks were in place to ensure staff were recruited safely. The provider needed to ensure that references were obtained from previous employers where possible. The provider told us they would ensure this happens.

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

- Staff understood and recognised potential risks to people. On the whole care plans and risk assessments contained explanations of the control measures and strategies for staff to follow to keep people safe. One risk assessment and one care plan required updating in relation to epilepsy. Staff told us they would update this straight away and we told the nominated individual. Following the inspection the registered manager told us this had been completed.
- People were supported to take positive risks to aid their independence.
- Accidents and incidents were responded to appropriately. The registered manager reviewed all incidents and records showed how they had considered lessons learnt and implemented changes when necessary.

Using medicines safely; Preventing and controlling infection

- Medicines arrangements were safe and managed appropriately; people received their medicines when they should.
- Protocols were in place for medicines prescribed for use 'as and when required' to guide staff when these medicines were to be given. Some protocols would benefit from further information adding.
- Feedback was given to the nominated individual to ensure staff followed correct infection control practices when administering medication.
- The environment was maintained to a satisfactory standard.

# 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.

Staff support: induction, training, skills and experience

- People were supported by skilled and competent staff. Staff received appropriate support from management.
- A staff induction and training programme was in place. Staff told us they found their induction to be good and felt trained to meet people's needs. A visiting training provider told us, "The registered manager has been really approachable and helpful with me arranging times to see staff. They [the registered manager] are happy to support staff developing in their roles."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Adapting service, design, decoration to meet people's needs

- Assessments of people's needs were completed and care and support was regularly reviewed.
- Care and support was planned, delivered and monitored in line with current best practice and evidence based guidance.
- The service environment met the needs of people. Some people were supported to live in more independent areas of the home. One person told us, "Straight away it just felt right here. It's a nice place. I was bowled over with the room and to have my own bathroom as well, it's brilliant."
- People were involved in making decisions about their environment including decorating their own bedrooms and communal areas. People's bedrooms reflected their personalities.

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

- People were involved with menu planning, supported to maintain a balanced diet and protected from risks of poor nutrition and dehydration.
- People provided positive feedback about the food. One person told us, "The food is absolutely first rate. There are usually two options to choose from."

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

- Guidance and support from healthcare professionals was obtained and followed. Information was shared with other agencies if people needed to access other services such as hospitals.

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 with appropriate legal authority. 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- Where people did not have capacity to make specific decisions or consent to their care, records showed decisions had been made in people's best interests.
- Applications to deprive people of their liberty had been made and systems were in place to monitor these.



# 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 treated with kindness; they were actively listened to and their choices respected. One person told us, "The people who work here are fantastic."
- Where people were not always able to express their full needs and choices verbally, staff understood their way of communicating.
- Staff were friendly and demonstrated a passion for providing a good quality service. One person told us, "The staff are really good, they have made me feel at home."
- Staff demonstrated a good knowledge of people's personalities, diverse needs, and what was important to them.

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

- Staff supported people to make decisions about their care. They knew when people wanted help and support from their relatives. Where needed staff sought external professional help to support decision making for people, such as other health professionals.

Respecting and promoting people's privacy, dignity and independence

- People were treated with compassion, dignity and respect. Staff could provide examples of how they promote people's dignity.
- People's right to privacy was respected and reflected in care planning.
- People were supported to remain as independent as possible. Staff could describe how people were encouraged and supported to do things for themselves, including household tasks and cooking.
- Systems were in place to maintain confidentiality and staff understood the importance of this. Care files and other private and confidential information were stored securely.

# 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

- People's needs and information on how best to meet their preferences were identified, met and reviewed.
- Staff were knowledgeable about people and had a good understanding of their preferences and interests; this enabled them to provide personalised care.

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 regularly engaged in the local community including shopping and cafes.
- People were also encouraged to spend time with friends and families. One person told us, "The staff don't want me tied to the place, they want me to get out and see my friends."

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.

- People's communication needs were identified, and reasonable adjustments were made. Information was presented in a way people could understand.
- Information in people's care plans supported staff to understand people's forms of communication.

Improving care quality in response to complaints or concerns

- Systems were in place to respond to any complaints. The complaints procedure was available within the service, including easy read versions.
- Complaints were responded to appropriately following the providers policy.

End of life care and support

- At the time of the inspection no one was being supported with end of life care.
- End of life care planning was not in place. Staff informed us they had received training on end of life care and felt confident to start having these conversations with people and their families and or representatives.

# 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.

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

- The registered manager understood their legal responsibilities to ensure regulations were being met.
- The registered manager was supported by a team of senior care workers, the nominated individual and a compliance manager.
- People and professionals we spoke with had confidence in the registered manager and found all staff to be approachable. One person told us, "I think they do a good job." A visiting social care professional said, "All staff are really approachable they are transparent in their roles."
- People were treated with respect and in a professional manner.
- Regular checks ensured people were safe and happy with the service they received.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- The provider demonstrated a commitment to provide person-centred, high-quality care by engaging with everyone using the service and stakeholders.
- Staff and the registered manager involved people in discussions about their care.
- People had opportunities to be involved in developing the service. Staff, people and their relatives were asked to complete a quality assurance questionnaire. Feedback was summarised and displayed, and action was taken where people made suggestions.
- Staff told us the registered manager was approachable and would listen to their concerns or ideas. They told us, "The registered manager is probably one of the best manager's I have ever had. If you have a problem, they listen to you. They are very understanding."

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 registered manager was open and transparent when dealing with issues and concerns. They understood their responsibility to apologise and give feedback if things went wrong.

Working in partnership with others

- The service worked closely with key organisations and had good links within the local community to ensure good outcomes for people.

- The registered manager took on board issues raised by other services such as the local authority.