

Wicksmith Holdings Limited

Hollybush Residential Home

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Hollybush Residential Home is a residential care service providing personal care and support for up to 14 people aged 65 and over. There were 14 people living at the service at the time of this inspection. The service is an adapted house, situated in a residential street in Newquay.

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

Records of people's care had been regularly updated. Five people were seen to be up and dressed, with four dozing in the lounge before 7am on the day of this inspection. Care plans were individualised and detailed most people's needs and preferences. However, it was not always recorded when people preferred to get up or go to bed. This meant it was not possible to establish if people chose to be up, dressed and in the lounge before 7am in the morning.

People and their relatives told us that people had a choice about when they got up and went to bed.

Care plans included risk assessments and guidance for staff on how to meet people's support needs. This meant any identified risks to people were minimised.

There were clear records to show, when assessed as needed, staff were monitoring specific health needs such as people's weight, food and drink intake and the risk of skin damage. Where people had been assessed as requiring pressure relieving mattresses, to protect them from skin damage, these had been provided.

Some people living at Hollybush were living with dementia. Suitable pictorial signage was in place to support people to move around the service independently.

People were relaxed and comfortable with staff and had no hesitation in asking for help from them. Staff were caring and spent time chatting with people as they moved around the service. People who wished to remain in their bedroom did so. Those spoken with confirmed this was their choice.

The service had suitable safeguarding systems in place, and staff knew how to recognise, and what to do if they suspected, abuse was occurring.

People told us the food was good. One person commented, "The food is really good here."

Relatives were positive about the care and support provided. Comments included, "We are very happy with everything" and "The staff are lovely and it is always very clean."

There were sufficient staff to ensure people's needs were met. Staff told us they received appropriate support and training.

The building was clean and there were no malodours. There were appropriate procedures to ensure any infection control risks were minimised. Cleaning and infection control procedures had been updated in line with COVID-19 guidance to help protect people, visitors and staff from the risk of infection. Suitable visiting arrangements were in place for families to visit as per the current government guidance. The service had not experienced any positive cases of COVID-19 throughout the pandemic.

People received their medicines as prescribed. There were appropriate processes for ordering, recording and storing medicines. The temperature of the medicine refrigerator was monitored. However, staff were not able to monitor the maximum and minimum temperature of this refrigerator. This was immediately addressed by the provider during the inspection. Regular audits were carried out of the medicines records to help ensure any errors would be identified in a timely manner.

The service was managed effectively. Staff were working well together, and one staff member said, "I am happy here, we are well supported."

Any changes in people's health were escalated to the relevant professional and relatives were kept informed. One visiting healthcare professional told us, "We visit regularly and have no concerns."

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.

The provider told us that people and their relatives had not recently been asked for feedback on the service's performance. This was due to the impact of COVID 19. We were assured that a survey would be sent out in the coming weeks.

There was a stable staff team who knew people well and worked together to help ensure people received a good service. People, their relatives and staff told us the staff and management were approachable and listened when any concerns or ideas were raised.

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

Why we inspected

The inspection was prompted due to concerns received from one person. We received concerns in relation to people, living at Hollybush Residential Home, who were being woken up very early in the morning, being dressed and taken to the lounge. We were also told that people were asked to go to their rooms at 10pm and remain there. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained good. This is based on the findings at this inspection.

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 coronavirus and other infection outbreaks effectively.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see

the safe and well led sections of this full report.

Follow up

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, 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 section below.

Is the service well-led?

Good ●

The service was well-led
Details are in our well-led section below.

Hollybush Residential 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

Hollybush Residential 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 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 professionals who work with the service. 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 four people who lived at the service about their experiences of the care provided. We spoke with three members of staff, including the provider and two relatives.

We reviewed a range of records. This included five people's care records and medication records. 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 a visiting healthcare professional who regularly visits the service.

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.

The purpose of this inspection was to check specific concerns received about people being woken up early to be provided with personal care, dressed and taken to the lounge and not having a choice about when they went to bed at night.

Systems and processes to safeguard people from the risk of abuse

- Five people were up and dressed, with four people dozing in the lounge, before 7am on the day of the inspection. These people were not able to confirm that they were up early by choice, due to living with dementia. This meant it was not possible to establish if people chose to be up early.
- Staff were able to tell us detailed information about each person's care and support needs and why some people were up early. Two people had it recorded in their care plan that they were early risers, but the others did not. People, the provider and relatives assured us that people were not woken but could get up and go to bed when they wished. A spot check had been carried out early one morning, prior to this inspection, by the registered manager and no concerns were found.
- People were relaxed and comfortable with staff and had no hesitation in asking for help from them. Relatives told us they were happy with the care they received and believed it was a safe environment.
- People were protected from potential abuse and avoidable harm by staff who knew about the different types of abuse.
- Staff knew how to report and escalate any safeguarding concerns.

Assessing risk, safety monitoring and management

- Care plans included risk assessments and guidance for staff on how to meet people's support needs. This meant any identified risks to people were minimised.
- There were clear records to show when staff needed to monitor specific health needs such as people's weight and the risk of skin damage. Where people had been assessed as requiring pressure relieving equipment, to protect them from skin damage, this had been provided.
- When people experienced periods of distress or anxiety staff knew how to respond effectively.
- The environment was well maintained and there were no malodours. Equipment and utilities were regularly checked to ensure they were safe to use. People told us, "It is very good here, lovely and clean."
- Fire safety procedures and appropriate checks and training for staff were in place.

Staffing and recruitment

- People, relatives and staff confirmed there were enough staff on duty to meet people's needs. During our inspection we saw staff had enough time to engage with people in a meaningful way.
- Staff were recruited safely. People told us, "The staff are all lovely" and "If you have to be in a home this is

the best."

Using medicines safely

- Staff confirmed, and we saw, there were regular medicine audits covering all aspects of medicines management and administration. This helped ensure any errors would be identified in a timely manner.
- Some prescribed medicines required cold storage. The temperature of the medicine refrigerator was monitored. However, staff were not able to monitor the maximum and minimum temperature of this refrigerator. This was immediately addressed by the provider during the inspection.
- Medicines that required stricter controls were not in use at the time of this inspection.
- People received their medicines safely and on time. Staff were trained in medicines management and had regular competency checks to ensure ongoing safe practice.
- There were systems in place for the storage, ordering, administering, and disposal of medicines.
- People who administered their own medicines were regularly assessed to help ensure they were safe and competent to do this.

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.

Learning lessons when things go wrong

- The provider was open and transparent and we were assured that people's preferences around when they chose to get up and go to bed would be reviewed and clearly recorded in their care plans immediately.
- Accidents and incidents were recorded and analysed so any trends or patterns could be highlighted.

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.

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 provider understood their responsibilities to be open and honest. The provider and registered manager had investigated the concerns received, about people being woken up early and asked to go to bed early, in an open manner. There were clear records held on how this had been carried out.
- People and their families had been regularly updated with the guidance and changes to visiting put in place to manage infection control in relation to COVID-19.
- The provider had notified CQC of any incidents in line with the regulations.
- The provider and registered manager had demonstrated a open approach when they had received the recent concerns. Staff were encouraged to raise any concerns in confidence through a whistleblowing policy.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager was on leave at the time of this inspection. The provider was present. Staff told us that the registered manager often worked alongside staff to help develop a positive culture.
- Relatives told us, "The staff and management are very welcoming and approachable."
- Staff told us, "I am happy here, we are well supported" and "We all work well together we are a good team."
- Staff demonstrated commitment to their roles and had built positive and caring relationships with people.
- The service's policies were regularly reviewed and updated to ensure they reflected best practice and the service's current procedures. People's care plans and risk assessments had been kept under review and gave staff guidance about how to provide person-centred care for people.

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

- The service is required to have a manager registered with the Care Quality Commission. The registered manager and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. At the time of this inspection the service had had a registered manager.
- The monitoring and auditing systems were in place and effective.
- Roles and responsibilities were defined and understood. The registered manager was supported by a

stable staff team.

- Important information about changes in people's care needs was communicated at staff handover meetings each day.

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

- Questionnaires had not recently been given to people and their families. This was due to the COVID-19 pandemic. The last survey was 2019 and the provider assured us that a new one would be issued very soon as restrictions are being relaxed.
- Staff told us they had regular one-to-one supervision with the manager. This provided opportunities for staff and managers to discuss any issues or proposed changes within the service.
- The provider and staff had a good understanding of equality issues and valued and respected people's diversity. Staff requests for reasonable adjustments to their employment conditions had been looked upon favourably by the management team.

Continuous learning and improving care

- Robust auditing systems were in place. The effectiveness of these systems were being continuously evaluated by the provider who spent time in the service on a regular basis.

Working in partnership with others

- The service worked effectively with external health and social care professionals to ensure people's care needs were met. Appropriate referrals had been made to professionals and guidance provided was acted upon.
- A visiting healthcare professional told us, "We visit regularly and have no concerns."