

Techcrown Limited

Hollywynd Rest 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

Hollywynd Rest Home is a residential home providing personal care for up to 40 older people, with a variety of different care and support needs. At the time of the inspection 25 people were using the service.

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

People were safe at Hollywynd Rest Home. Staff demonstrated a good knowledge of how to protect people from harm. There was an effective system to identify risks associated with people's care. These were recorded and regularly reviewed. Health professionals were contacted, where appropriate, to support people as needed.

The home was clean and tidy. Hollywynd had a robust cleaning regime in place to support good infection prevention and control. Some staff were seen at the inspection to not be wearing personal protective equipment (PPE) correctly. This was raised with the provider and deputy manager and was rectified immediately.

Staff knew people well and were engaging in their interactions. People received their medicines in a safe and personalised way, with an electronic system to promote accuracy of records and administration.

People, relatives and staff spoke positively about the home. One person told us, "There are lovely staff here, they always take the time to help in anyway they can." A staff member said, "[Deputy manager] is very approachable, nothing is too much trouble and I feel confident in raising any concerns I have."

Robust audit systems were in place to identify any areas which required improvement and action was taken to develop practice if needed. Regular health and safety checks were made to ensure the environment was safe and well kempt.

People were involved in decision making about their care and were supported to maintain independence. They were given opportunities to give feedback on their care and told us they felt comfortable in doing so.

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

Rating at last inspection

The last rating for this service was good (published 16 November 2019).

Why we inspected

We received concerns in relation to a variety of matters, including the environment, infection prevention and control, staffing levels and skills, and people's care. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We also 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.

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 not changed. This is based on the findings at this inspection.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Hollywynd Rest Home on our website at 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. 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 well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Hollywynd Rest 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

This inspection was undertaken by one inspector.

Service and service type

Hollywynd Rest 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 did not have a manager registered with the Care Quality Commission at the time of inspection. This means that the provider has legal responsibility for how the service is run and for the quality and safety of the care provided. The provider was actively recruiting for a registered manager and the deputy manager was acting as interim manager.

Notice of inspection

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. 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 five people who used the service about their experience of the care provided. We spoke with seven members of staff including the provider, deputy manager, senior care workers, care workers and the housekeeping team.

We reviewed a range of records. This included three people's care records and multiple 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 relatives to obtain feedback. We looked a number of quality assurance records and policies. We spoke with two professionals who have regular contact with 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.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People and their relatives told us they felt safe in the home. One person told us, "I'm very fortunate to live here, I have no complaints, they keep me safe and well."
- Effective systems and procedures were in place to protect people from the risk of abuse and harm. The provider had appropriately raised safeguarding issues with the correct authorities and had completed thorough investigations. Any lessons learnt were shared with staff through supervision, handover or team meetings.
- Staff had completed appropriate training in safeguarding and told us they would feel confident reporting any concerns. One staff member said, "The residents come first. I would report anything I was concerned about straight away and have confidence it would be dealt with."
- The provider analysed accidents and incidents in order to identify any patterns or themes. Action had been taken to make improvements when necessary to drive good, safe practice.

Assessing risk, safety monitoring and management

- Risks to people's health and wellbeing were managed safely and effectively. Risk assessments were in place, for example, risk of falls, pressure areas and specific dietary needs. Guidance for staff on how to support people safely and minimise any risk was clear and precise.
- Risk assessments were up to date and relevant. They were also flexible, for example, one person required a fluctuating level of support with their mobility throughout the day. Clear instruction was in place for staff to assess the level of support needed and adapt their practice accordingly to encourage independence but promote safety.
- The provider and deputy manager completed regular checks of the home environment, including equipment, fire safety and water safety, to ensure it was safe and complied with the necessary standards.

Staffing and recruitment

- People, relatives and staff all spoke positively about the level of staffing in the home. One person told us, "They [staff] always have time to help. They never tell us to go away, they spend time with us, its lovely." A relative said, "It has been tricky to visit due to the pandemic, but they are always at the end of the telephone. I can ring any time and speak with staff to get an update on [my relative]."
- We observed a good level of staffing to meet people's needs effectively. Interactions between staff and people were friendly, warm and caring.
- Staff had been recruited safely with appropriate checks completed before staff started working. For example, references had been obtained and checks with the Disclosure and Barring Service (DBS) undertaken to ensure staff were suitable to work with people living at the home.

Using medicines safely

- People's medicines were managed well, and they received them as and when they should. People living at the home and their relatives were happy with how they received their medicines. The provider had an electronic system where medicines had to be scanned before being given to confirm it was the correct box. This added an additional safeguard to minimise errors being made.
- Staff had worked with external professionals to establish appropriate and personalised plans for as and when needed (PRN) medicines. Guidance was in place for staff to follow to ensure people received their medicines as they preferred. We saw medicines being given gently and sensitively.
- Regular audits were undertaken to check stock was sufficient and medicine administration records (MARs) were completed accurately.

Preventing and controlling infection

- During the inspection, we saw a number of staff members wearing their facemasks incorrectly. We raised this with the provider and signposted to resources to develop their approach. The issue was addressed immediately during the inspection and we also received assurances following the inspection that personal protective equipment (PPE) was being used correctly.
- 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 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

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.

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

- The home had a positive culture and people were comfortable in the presence of staff. Staff told us there was a good atmosphere in the service saying, "Morale is good, we've been through a lot as a home and staff team, but the atmosphere is great. We keep each other going."
- Care plans supported staff to provide person centred care and it was evident they knew people well. The care plans included information about people's life histories, likes, dislikes and achievements which supported staff to get to know people. For example, we observed a staff member and person enjoying a conversation in French as the person liked to speak this language, albeit not their native tongue.
- Relatives spoke positively about being involved in their loved ones care and told us they felt staff knew their relatives well. One relative said, "[Staff] do my [relatives] shopping and always know what they want and like. I only have to mention something, and it is sorted. They sorted out my [relatives] hearing aids. I was very grateful."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 and deputy manager understood their roles and regulatory responsibilities. There was not a registered manager in post at the time of the inspection, however, active recruitment was being undertaken.
- A robust audit system was in place, for example, of accident and incidents, falls, medicines and infection prevention and control. The audits completed were effective in ensuring that appropriate standards of quality and safety were maintained at the home.
- Staff understood their roles clearly and completed tasks relevant to the position they were assigned.
- The provider and deputy manager demonstrated a good knowledge of their duty of candour. There was a system to ensure all appropriate agencies were notified of any incidents that occurred. Statutory notifications had been submitted to CQC in line with current regulations. A statutory notification is information about important events which the service is required to send us by law.

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

- People told us they were asked for feedback. One person said, "If I have any concerns, I tell the staff and it is dealt with, I have no worries." Another person told us how they were able to give views on what activities they do. We observed another person giving feedback on the food menu, and action was taken immediately

following the comments.

- Staff told us they felt supported in their role. One member of staff stated, "The deputy is absolutely brilliant, and the owners are in regular contact and listen to any thoughts we might have."

Continuous learning and improving care

- Regular staff meetings were held to share learning and ideas to drive improvement within the home. Staff also took part in daily handovers to share any knowledge of people's changing needs.
- Plans were in place to further improve the electronic care planning system. This included linking the call bells to the care plans so audits can be completed more readily.
- A recent safeguarding enquiry had been undertaken. Following this, improvements had been made to the monitoring and ordering of medicines within the home.

Working in partnership with others

- Staff communicated appropriately with a range of professionals to ensure people's needs were met, and they received the support required. We saw that referrals had been made to appropriate services as needed. For example, during the inspection we saw one person being supported to contact their social worker via telephone.
- External professionals spoke positively about staff and their practice. One professional told us, "Staff are always welcoming and helpful. Staff are knowledgeable about the people they support. They are engaging and ensure people receive good, person centred care."