

## The Hollies Nursing And Residential Home Limited

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### **Inspection report**

44 Church Street Clayton-Le-Moors Accrington Lancashire BB5 5HT

Tel: 01254381519

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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

The Hollies Nursing and Residential Care Home provides personal care and accommodation for up to 31 people, some of whom are living with dementia. When we inspected there were 28 people living in the home. Accommodation is provided over two floors with lift access.

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

People were supported by staff who had been recruited safely and were trained to support people to manage risks. Medicines management had improved, and records were maintained accurately.

The providers infection control policies had been updated to reflect the additional risks posed by the Covid 19 pandemic. Staff understood and followed the procedures. The home ensured extra vigilance when accepting admissions from hospital which helped maintain peoples' safety.

Management oversight of the quality of care and care records had improved. Relatives of people living in the home told us they were confident in the new manager and identified recent improvements.

Rating at last inspection and update: The last rating for this service was requires improvement (published May 2019). There were two breaches of the regulations. The provider completed an action plan after the last inspection which showed what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of the regulations.

#### Why we inspected

We undertook this focused inspection to check whether the provider had followed their action plan and to confirm whether they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those 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 changed from Requires improvement to 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 Hollies Nursing and Residential Home Limited on our website at www.cqc.org.uk.

## 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 •
Is the service well-led? The Service was well led.	Good



# Hollies Nursing and Residential Home Limited

**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 the Care Quality Commission's (CQC) response to the coronavirus pandemic we looked at the infection control and prevention measures the provider had in place. This helped us identify examples of good practice in infection prevention and control.

#### Inspection team

The inspection was completed by one inspector.

#### Service and service type

The Hollies 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. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided. The nominated individual is responsible for supervising the management of the service on behalf of the provider. There was a manager in post who had applied to register with CQC.

We gave the service 24 hours' notice of the inspection. This was because we wanted to be sure it was safe for us to visit during the current Covid 19 pandemic.

#### 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. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

#### During the inspection

We spoke with two people who used the service and four relatives about their experience of the care provided. We spoke with seven members of staff including the manager, deputy manager, nursing staff and care staff.

We reviewed a range of records. This included two people's care records and several people's medicine records. We looked at two staff recruitment files. We reviewed a variety of records relating to the management of the service, including audits and policies and procedures in relation to the Covid 19 pandemic.



## 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 Requires Improvement. At this inspection this key question has now improved to Good. This means people were safe and protected from avoidable harm.

#### Using medicines safely

At our last inspection in May 2019 we found medicines were not managed properly and safely. This was a continuing breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found enough improvement had been made and the service was no longer in breach of the regulation.

- The provider had reorganised how they administered medicines, this included a large climate controlled room for the storage of all prescribed medicines. Staff responsible for medicines told us they found the system much easier to manage and had increased confidence when giving out medicines.
- The provider had improved record keeping. Effective audits and governance helped identify any issues with medicines which had been addressed quickly. Staff told us they found these helpful and promoted good practice.
- The provider ensured staff responsible for administering medicines were trained and their competency checked regularly.

Systems and processes to safeguard people from the risk of abuse

- The manager continued to protect people from the risk of harm and abuse. The services policies were clear and robust. There was signage in the home which advised people how to raise a concern.
- Staff were trained to understand and respond to any safeguarding concerns. Staff we spoke with were able to explain how they would respond to a concern.

Assessing risk, safety monitoring and management

- The manager followed robust risk assessment and management plans. Risk assessments identified clearly the potential risks people needed support to manage and care records were updated regularly in response to change.
- Both staff and relatives were confident people were supported to be as safe as possible. One relative told us, "I know (name) is safe, they identified their needs very quickly, got things in place, the risk management was good."

#### Staffing and recruitment

- The provider followed robust recruitment procedures. Staff were recruited safely with all necessary checks completed prior to staff starting work.
- The provider had a system to calculate how many staff were needed to support people safely. This helped ensure there were enough staff available. We saw how additional staff had been appointed to meet the fluctuating needs of people during the Covid 19 pandemic.

• Relatives we spoke with said they felt there were enough staff to keep people safe. Staff we spoke with felt there were times when they were very busy but managed to keep people safe.

Preventing and controlling infection

- The management team ensured staff followed effective infection control procedures.
- Staff had received additional training to ensure they understood how to use personal protective equipment to minimise the risks of Covid19. Additional cleaning staff were in post which increased cleanliness and hygiene in the home.

Learning lessons when things go wrong

• The manager was committed to learning lessons and improving the quality of care for people in the home. Examples included; the provision of a new clinical room and improved medicine management and changing meal times around in response to people losing weight which had improved people's nutrition.



## 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 improved to Good. 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

At the last inspection in May 2019 we found, the lack of robust processes to monitor the quality and safety of the service was a continuing breach of Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection enough improvement had been made and the service were no longer in breach of the regulation.

- The management team were clear about what was expected from staff and what people living in the home could expect. Staff we spoke with felt communication was clear and the service was managed well. Relatives we spoke with praised the management of the home.
- Auditing and governance had improved. More robust systems had been developed which helped ensure the management team had effective oversight of the quality of care and record keeping. Records showed how issues had been easily identified and addressed.
- A keyworker system had been developed which helped ensure staff had a more consistent oversight of people's needs and preferences.

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

- The management team promoted person-centred values by including people and their relatives in their care. A relative told us, "Every time there has been a change or an assessment they have invited us."
- Care plans reflected good practice in person centred care.

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

- The management team continued to involve people and regular meetings were held for staff. A new communication book helped keep staff informed of what was happening.
- People living in the home and their relatives continued to be involved. In response to the Covid 19 pandemic the staff supported people to stay in touch using smart phones and safe visits through windows. Relatives we spoke with felt they had been kept up to date.

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 management team understood their responsibilities in relation to the duty of candour. We reviewed recent incidents which showed they had informed family members of concerns.
- The management team continued to notify the appropriate agencies of reportable incidents.
- Relatives we spoke with felt confident they were kept informed. One told us, "They are always open and clear with me and don't dress things up. We trust them fully."

Working in partnership with others

• The management team continued to work effectively with partner organisations. These included; health professionals, commissioners, local authority and other homes within the group.