

## Dharma Limited Hollins Bank Care Home

#### **Inspection report**

601-603 Lytham Road Blackpool Lancashire FY4 1RG Date of inspection visit: 23 March 2016

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#### Ratings

Overall rating for this service

Requires Improvement 🔴

Is the service safe?

**Requires Improvement** 

## Summary of findings

#### **Overall summary**

We carried out an unannounced comprehensive inspection of this service on 27 October 2015. At which a breach of legal requirements were found. This was because the provider had not operated safe, consistent recruitment procedures. The provider had failed to obtain required checks prior to employing personnel that worked with people who lived at the home.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach. We undertook a focused inspection on 23 March 2016 to check they had followed their plan and to confirm they now met legal requirements.

This report only covers our findings in relation to the latest inspection. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Hollins Bank Care Home' on our website at www.cqc.org.uk.

Hollins Bank provides care and support for a maximum of 44 older people, some of whom may have physical disabilities or sensory impairment. The Home is situated in a residential area of Blackpool. It offers single and shared accommodation over two floors. Garden areas to the front and rear are accessible for wheelchair users via a ramp. Communal space is accommodated in three lounges and a dining room.

A registered manager was not in place. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. We saw evidence that the provider was in the process of registering a new manager.

During this inspection, we found the provider had taken action to ensure suitable staff were recruited. They were making ongoing improvements to related systems in place, including implementation of a new staff file audit form.

Staff files we reviewed contained Disclosure and Barring Service checks, references and reviews of the employee's work history. On discussing recruitment with one staff member, they told us, "It was thorough, very thorough."

Newly recruited staff had received an induction to underpin their skills in working with vulnerable people. One person who lived at the home told us, "I like the new staff. They've fitted in really well." The management team assured us they were continuing to improve their policy and recruitment processes in the employment of suitable staff.

We could not improve the rating for safe from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned Comprehensive inspection.

#### The five questions we ask about services and what we found

We always ask the following five questions of services.

#### Is the service safe?

We found action had been taken to improve people's safety.

Staff files of recently recruited employees contained required checks to ensure they were suitable to work with vulnerable people. The provider had completed checks of their employment history.

An up-to-date recruitment policy was in place. The provider had introduced recruitment audits to check processes were safely completed.

Staff had undergone induction training to underpin their knowledge and understanding.

#### Requires Improvement 🗕



# Hollins Bank Care Home

## Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection team consisted of one adult social care inspector.

Prior to our unannounced inspection on 23 March 2016, we reviewed the information we held about Hollins Bank. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people who lived at the home. We checked safeguarding alerts, comments and concerns received about the home. At the time of our inspection, the provider was working with the Local Authority's investigation into ongoing safeguarding concerns.

We spoke with a range of people about the home. They included three members of the management team, a staff member and one person who lived at the home. We also spoke with the commissioning department at the local authority. We did this to gain an overview of what people experienced whilst living at the home. They told us they were closely monitoring the service to check improvements were being made to people's safety and welfare.

We also spent time observing staff interactions with people who lived at the home and looked at records. We checked documents in relation to four staff files. We reviewed records and systems related to the recruitment of staff.

### Is the service safe?

## Our findings

At our comprehensive inspection of Hollins Bank on 27 October 2015, we found the management team had not always operated safe, consistent recruitment procedures. They had not obtained references to check the conduct of one staff member with previous employers. Additionally, we found another staff member was on duty prior to the management team obtaining their Disclosure and Barring Service (DBS) checks.

This was a breach of Regulation 19 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 because the management team had not always protected people against the risks of unsafe recruitment.

At our focused inspection on 23 March 2016, we found the provider had followed the action plan they submitted. They met the requirements of the regulation and were making ongoing improvements to their recruitment systems.

We discussed the ongoing enhancements in recruitment with the management team, who told us this had strengthened their procedures. These included the updated service policy and new staff file audits. They said four staff had been employed since our comprehensive inspection in October 2015. One management team member told us, "The new system makes our recruitment much more robust."

We reviewed four staff files to review checks put in place by the provider. We found all the files contained DBS checks and references from previous employers. These had been obtained prior to staff commencing in their posts. We spoke with a staff member who confirmed the management team had obtained the required checks. The staff member added, "They told me that I couldn't start until this was in place." Additionally, application forms and interview records were in place and the provider had reviewed any gaps in employment.

Staff files we looked at also included documentation of staff undertaking induction training to underpin their skills in working with people. This included guidance to cover, for example, familiarisation to the building, fire and environmental safety, policies and personal care. This demonstrated the provider had improved systems related to the recruitment of suitable staff. One person who lived at the home told us, "All the staff, including the new ones, are very good. They know how to support me."

We noted the recruitment policy was up-to-date and covered all stages of related processes. The management team had developed a new staff file audit form. This document intended to give the provider oversight of staff recruitment to ensure they met the requirements of the regulations.