

Williams & Spenceley Limited

Howlish Hall Residential Care Home

Inspection report

Howlish
Coundon
Bishop Auckland
County Durham
DL14 8ED

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12 July 2022

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Tel: 01388741792

Website: www.howlish-hall.co.uk

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

Howlish Hall Residential Care is a residential care home providing accommodation and personal care to 28 older people at the time of our inspection. The service can support up to 40 people in one adapted building over two floors.

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

We found that some of the windows at the home were not in line with health and safety regulations and needed immediate attention. We have made a recommendation regarding this. The registered manager and provider took immediate action following our inspection. People and their relatives told us they were safe and felt safe living at Howlish Hall residential care home and they were happy with their care and support. 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.

Medicines were administered safely and records regarding people's medicines were completed effectively.

Infection prevention control practices were in place. All essential visitors had to wear appropriate personal protective equipment (PPE). Additional cleaning of all areas and frequent touch surfaces was in place and recorded regularly by staff. Training included putting on and taking off PPE, hand hygiene and other COVID-19 related training.

There were systems in place for communicating with people, their relatives and staff regarding people's care and support. The environment was clean, safe and maintained to a good standard. It was also adapted to meet people's needs.

Individualised risk assessments were in place to ensure people could take risks safely. Staff were confident about how to raise concerns to safeguard people. Robust recruitment and selection procedures ensured suitable staff were employed.

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 8 June 2021).

Why we inspected

This was a planned inspection based on the previous rating.

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 COVID-19 and other infection outbreaks effectively.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

We have made a recommendation about ensuring all windows at the home are in line with health and safety regulations.

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.

Howlish Hall Residential Care 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 and an Expert by Experience carried out this inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Howlish Hall Residential Care 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 the local authority and 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 this information to plan our inspection.

During the inspection

We spoke with two people who used the service and seven relatives about their experience of the care provided. We spoke with three members of staff, the registered manager, the administrator and maintenance worker. We reviewed a range of records. These included two people's care records and six people's medication records. We looked at staff records in relation to recruitment and other records relating to the management of the service, including; audits, policies and procedures and quality assurance records.

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.

Assessing risk, safety monitoring and management

- Some of the windows at the home were single pane glass and didn't meet health and safety regulations.
- The registered manager was not aware of safety regulations regarding to windows and this was not included in the safety audits of the windows.

We have recommended that the provider carries out a risk assessment and ensures the windows are in line with health and safety standards.

- Fire safety practices helped ensure people's safety and included regular checks of equipment used by staff. Recommendations from a recent fire department visit had been promptly completed.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. We observed positive interactions, between staff and people living at the home.
- There were effective safeguarding and whistleblowing procedures in place at the home. Staff told us they would report any harmful or abusive practice they witnessed.
- Relatives felt their family members were safe at the home. One relative told us, "Yes, (person is safe), they look after them well. They went there for respite and decided to stay. Very happy there. There are plenty of staff and if I ring, they explain everything."

Using medicines safely

- Medicines were managed and administered safely.
- People received their medicines as prescribed and at the right time. Medicine records were clear for staff to follow and were accurately completed.
- Where appropriate, people were also supported to manage their own medicines safely.
- Clear guidance and procedures were in place to manage emergency medicines that were used to manage different people's health conditions.

Staffing and recruitment

- There were enough staff to meet people's individual needs and maintain their safety.
- Staffing levels were increased when people's needs changed. One relative told us, "When I visit, if we need anything, we use the buzzer and it doesn't take the staff long to come – less than a minute."
- Staff were recruited safely. The provider's processes included robust checks to ensure only suitable staff were employed.

Preventing and controlling infection; Visiting in care homes

- The provider had good infection prevention and control policies and practice in place including a service-specific COVID-19 risk assessment.
- The registered manager ensured good standards of cleanliness and hygiene were maintained. All staff had received training in infection prevention and control. Staff used personal protective equipment (PPE) effectively and safely and they had plenty of PPE stock. Staff tested regularly for COVID-19.
- People received visitors in line with the current government guidance. Relatives told us they could visit whenever they wanted to. The service offered relatives COVID-19 tests and asked them to wear face masks.
- Health and social care professionals had to show a negative COVID-19 test result and wear PPE in the home

Learning lessons when things go wrong

- Accidents and incidents were recorded on an individual basis. The registered manager analysed these to look for any patterns or trends and took appropriate action to minimise risk of further incidents.

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 provider and management team worked hard to instil a culture of care in which staff truly valued and promoted people's individuality and protected their rights.
- Staff felt respected, supported and valued by senior staff which supported a positive culture.
- Management and staff put people's needs and wishes at the heart of everything they did. The atmosphere within the home was relaxed and welcoming.

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

- The provider sought feedback from people and those important to them and used the feedback to develop the service. □
- Staff we spoke with all felt involved in developing and improving the service. Staff meetings took place and the registered manager also had an open door policy and staff felt able to raise any issues or ideas outside of meetings.

Continuous learning and improving care

- The provider kept up-to-date with national policy to inform improvements to the service. The staff were aware of the latest government guidance in relation to COVID-19. One member of staff told us; "The manager is always updating us on where we are at with COVID-19 Guidance, as and when it changes."

Working in partnership with others

- Staff at the home worked closely with a range of external professionals such as occupational therapists, district nurses and the dietician.

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

- Policies and procedures were current and in line with best practice.
- The registered manager carried out audits that included action plans for improvement where needed.
- The provider understood their legal responsibility to notify CQC about incidents that affected people's safety and welfare had sent us notifications relating to significant events occurring within the service.

Continuous learning and improving care, working in partnership with others

- The registered manager took on board the opinions and views of people who used the service and had put regular house meetings in place for people to share their ideas and views. Questionnaires were used to collect relatives views.

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 understood their responsibility around the duty of candour and showed commitment to openness and honesty when something went wrong and was able to share examples with us and demonstrated how they had taken appropriate action.
- The service had good working relationships with the local authority and commissioners and shared information appropriately.
- The registered manager was open with the inspector during the inspection and took on board suggestions for improvements.