

Williams & Spenceley Limited

# Howlish Hall Residential Care Home

## Inspection report

Howlish  
Coundon  
Bishop Auckland  
County Durham  
DL14 8ED

Tel: 01388741792  
Website: [www.howlish-hall.co.uk](http://www.howlish-hall.co.uk)

Date of inspection visit:  
27 August 2019

Date of publication:  
06 September 2019

## Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Requires Improvement** ●

Is the service effective?

**Requires Improvement** ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

### About the service

Howlish Hall is a residential care home providing accommodation and personal care for up to 40 people aged 65 and over. There were 28 people living here at the time of our inspection.

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

The provider and the manager had taken steps to improve the service and ensured people received safer care. An action plan to address the warning notice carried out by CQC had been implemented. All the requirements of the warning notice had been met.

Staff supported people to access chairs which were suitable for their height and enabled them to better stand up. People's care records had been updated to include nutritional information and the use of bed rails. Actions had been taken to reduce the risk of people becoming trapped in the bed rails.

Audits to measure the effectiveness of the service had been improved. They now included checks on bedrails, emergency pull cords and topical medicines.

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.

### Rating at last inspection and update:

The last rating for this service was requires improvement (published 29 June 2019) when there were multiple breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

Following our last inspection, we served a warning notice on the provider and the registered manager. We required them to be compliant with Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 by 31 July 2019.

### Why we inspected

This was a targeted inspection based on the warning notice we served on the provider and the registered manager following our last inspection. CQC are conducting trials of targeted inspections to measure their effectiveness in services where we served a warning notice. The provider completed an action plan after the last inspection to show what they would do and by when to improve the governance of the service.

We undertook this targeted inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the governance of the service. The overall rating for the service has not changed following this targeted inspection and remains requires improvement. This is because we have not assessed all areas of the key questions.

### 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?

The service was not always safe.

Details are in our safe findings below.

**Requires Improvement** ●

### Is the service effective?

The service was not always effective.

Details are in our safe findings below.

**Requires Improvement** ●

### Is the service well-led?

The service was not always well-led

Details are in our safe findings below.

**Requires Improvement** ●

# 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. This was a targeted inspection. CQC are conducting trials of this type of inspection to follow up services where CQC have issued a warning notice.

#### Inspection team

The inspection was carried out by one inspector.

#### Service and service type

Howlish Hall is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 who was registered with the Care Quality Commission. The previous registered manager had left the service. A newly appointed manager had made a successful application to be registered and had been given an interview date to check on their suitability. A registered manager 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 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.

#### During the inspection

We spoke with four members of staff including the registered manager, the deputy manager and care staff. We carried out observations of people who used the service. We reviewed a range of records. This included two people's care records and multiple medication records. We looked at staff supervision records and audits.

# 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 remained the same. We have not changed the rating as we have not assessed all of this key question area. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice. Enough timely action had been taken and the provider was no longer in breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in this key question.

The remaining breaches found at our last inspection in this key question will be reviewed at our next scheduled inspection. This is to allow the provider time to embed their improvements.

Using medicines safely.

At our last inspection the provider had failed to ensure topical medicines charts were completed. Action had been taken to make improvements.

- The new manager had implemented new topical medicine charts. Staff understood the purpose of the charts and were completing them. Body maps were in place to show staff where to apply people's topical medicines.

## Is the service effective?

### Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has remained the same. We have not changed the rating as we have not assessed all of this key question area. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice. Enough timely action had been taken and the provider was no longer in breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in this key question.

Ensuring consent to care and treatment in line with law and guidance

At our last inspection the provider had failed to put in place documentation in line with the Department of Health guidance on the Mental Capacity Act 2005 (MCA). Action had been taken to make improvements.

The MCA provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. We checked whether the service was working within the principles of the MCA.

- The provider had introduced appropriate documents which following the Department of Health guidance. The manager showed they understood the requirements of the MCA. Arrangements were in place for staff to document where people lacked capacity. Decisions had been made in people's best interests.



# 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 remained the same. We have not changed the rating as we have not assessed all of this key question area. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice, Enough timely action had been taken and the provider was no longer in breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in this key question.

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

At our last inspection the provider had failed to demonstrate good governance. Action had been taken to make improvements.

- The manager had improved the audits to monitor the effective of the service. Checks had been put in place to see if the emergency pull cords in communal areas were accessible. A separate audit had been put in place to monitor the application of people's topical medicines. Senior care staff were required to sign daily audit checks to say they had checked topical medicine records.
- The manager had introduced new staff supervision records in line with the provider's policy. These were made available to the inspector. The manager had drawn up a plan to meet staff training needs identified in supervision meetings and was finding ways of meeting these needs.
- Enough information had been obtained by the service to ensure agency workers had the appropriate knowledge and skills to meet people's care needs.
- The manager had ensured records to demonstrate the care and treatment provided to people were in place. These included the use of bed rails and accurate nutrition records.
- Staff had ensured people were sitting on chairs appropriate to their height.
- CQC have published three previous reports following inspections of this service when it was rated requires improvement. During our last inspection we found continued regulatory breaches. This demonstrated a failure to act on feedback on and make required improvements to return the service to a rating of good. Since our last inspection the manager had identified actions to be taken to make improvements. Steps had been taken to carry out the actions and improvements were evident in the service.