

# The Salvation Army Social Work Trust

## Holt House

### Inspection report

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### Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

Holt House provides personal care and accommodation for up to 32 people, some of whom are living with dementia. At the time of our inspection there were 27 people living in the home. At the last inspection, in July 2015 the service was rated Good. At this inspection we found that the service remained Good.

The care that people received remained safe. There were enough staff to provide support to people to meet their needs. People were protected from the risk of harm and received their prescribed medicines safely. Staff had been safely recruited to ensure they were fit to work with people who used the service.

The care that people received continued to be effective. People made decisions about their care and staff sought people's consent. Where people lacked capacity they were helped to make decisions. People received support to stay well and had access to health care services and were able to choose what to eat. Staff received training to meet the needs of people who used the service.

The care people received remained good. People were treated with dignity and staff were caring and kind. Staff helped people to make choices about their care and their views were respected. People's wishes to be cared for in the future and make advance decisions were recorded.

The care that people received remained responsive. People were involved in the planning and review of their care and support and there was a wide range of hobbies and activities available for people. Where people had any concerns they were able to make a complaint and this was responded to.

The service continued to be well-led. Systems were in place to assess and monitor the quality of the service. People and staff were encouraged to raise any views about the service on how improvements could be made. The manager promoted a kind and compassionate value base which put people at the heart of the service.

## 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 remained Safe.

### Is the service effective?

Good ●

The service remained effective.

### Is the service caring?

Good ●

The service remained caring.

### Is the service responsive?

Good ●

The service remained responsive.

### Is the service well-led?

Good ●

The service remained well led.

# Holt House

## Detailed findings

### 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.

This inspection took place on 12 September 2017 and was unannounced. It was undertaken by one inspector and an expert by experience. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service.

The provider completed a Provider Information Return [PIR]. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. The provider returned the PIR and we took this into account when we made judgements in this report. We also reviewed other information that we held about the service such as notifications, which are events which happened in the service that the provider is required to tell us about.

We spoke with six people who used the service and two visiting relatives. We spoke with the registered manager, head of care, two care staff, one senior care staff, the activity coordinator and the chaplain based at the service.

We looked at four people's care records and the way in which people's medicines are managed. We looked at staff training records, recruitment files, rotas and the systems the provider had in place to monitor and improve the quality of care for people.

# Is the service safe?

## Our findings

At our previous inspection we found that the service was safe. At this inspection we had no concerns about people's safety and the service continued to be good in this area.

People told us they felt safe. One person told us: "I do feel very safe, there is always company around me, the home is very secure and I am never alone, I have no complaints." Another person told us: "I feel safe because we are well looked after, there is nothing to be nervous about here, they check on you at night to make sure we are ok." We found that people were safeguarded from the risk of abuse as staff knew the signs of abuse and knew what to do if they suspected potential abuse. The registered manager followed the local safeguarding procedures when they had been alerted to alleged abuse.

People and staff told us that there were sufficient numbers of suitably trained staff to meet people's needs. One person confirmed that they had a buzzer in their room and if they used it staff came quickly. We observed that people did not need to wait for long periods of time to have their needs met and a member of staff was allocated to the lounge and dining room at all times. We checked to ensure that provider followed safe recruitment procedures and saw that they completed pre-employment checks prior to offering staff employment. This meant that staff employed were of good character and fit to work with the people at the service.

We saw that risks to people were assessed and action was taken to minimise the risks, for example one person had had an incident of choking whilst walking with their frame. We saw a risk assessment had been implemented to ensure that the person was discouraged from eating whilst walking. Staff we spoke with knew this person's risks and told us they followed the risk assessment.

People's medicines were stored, administered and managed safely. One person told us: "The staff give me my tablets and I take them, I know what they are for." We saw each person had their own medicines stored and secured in their own rooms and they were administered by staff who had received training to do so.

## Is the service effective?

### Our findings

At our previous inspection we found the service was effective. At this inspection we had no concerns and the service continued to be good in this area.

People told us that the staff that cared for them were effective in their role. One person told us: "The staff are competent they never make any stumbles, they always know what they are doing, they are great, I have no complaints." We saw that staff were supervised and received regular training to help them fulfil their roles.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We found that the provider was following the principles of the MCA by ensuring that when people lacked the mental capacity to agree to their care they were supported by their legal representative to do so in their best interest.

People's nutritional needs were met as they were supported to maintain a healthy diet that met their individual needs and preferences. One person told us: "I am a vegetarian and they always try and find something interesting for me and they try and vary the food I get." Another person told us: "The food here is perfect, because I can't eat anything sweet as it affects my stomach they find alternatives for me such as cheese and biscuits or cheese scones instead of fruit ones."

When people became unwell or their needs changed they were supported to gain health care advice. People told us they could see their GP and that the podiatrist visited the service every six months. We saw one person had recently been unwell and staff at the home had acted and the person had been admitted to hospital. On the day of the inspection the person was recovering back at the home.

## Is the service caring?

### Our findings

At our previous inspection we found that the service was caring. At this inspection we had no concerns and the service continued to be good in this area.

People who used the service told us that they were treated with dignity and respect. One person told us: "The staff are really nice, we have a laugh with them, they enjoy their jobs even the nasty bits." Another person was so happy with their care they told us: "I am going to put this place in my will for my daughter I like it here so much." We observed that staff interacted with people in a kind and compassionate manner whilst supporting them.

Positive relationships were promoted and maintained. One person told us: "The best thing is I am able to sit in the conservatory with my friend and look at the garden, we both love it, this is our space and people respect it." Another person told us: "Everyone here is pleasant, the staff and even the guests are all very nice, It is easy to find someone with similar interests to talk to."

People were given choices and were involved in decisions about their care. One person told us: "My daughter and I looked at six other care homes before this one and we chose Holt House because they didn't treat you like an idiot. With the best will in the world some people don't think you can make decisions for yourself but they respect you here."

People's right to privacy was respected. We heard one staff member telling the registered manager that one person had chosen to stay in their room today and this was respected. Each person had their own room and we saw some people chose to remain in them. We observed that staff knocked on people's doors before entering and we saw nothing to compromise a person's dignity on the day of the inspection.

People were supported with planning their end of life care. People's wishes were recorded and we saw that staff had received training in end of life care. The chaplain who was employed by the service informed us that they offered people and their families spiritual guidance and support at the end of people's lives and if requested would give a eulogy as a chaplain and as a person who knew the deceased.

## Is the service responsive?

### Our findings

At our previous inspection we had no concerns in the responsiveness of the service and we had rated this area as good. At this inspection we found that the service continued to be good in this area.

People's individual assessed needs were met and their preferences were recorded in their care plans. One person told us: "I leave my care planning to my daughter, she looks after that". Another person told us: "I have a Key Worker, who knows all about me, they took me shopping in Bury to Marks and Spencers and Debenhams." We saw people's care plans were regularly reviewed and when people's needs changed the plans were updated to reflect the changes. For example, one person had recently had a stay in hospital and required more support and we saw that their care plan had been up dated to reflect the change in the person's needs. Staff we spoke with knew people well and knew their care needs and preferences. We observed a member of staff helping people with their breakfast and we saw that they knew what to offer people as they knew their likes and dislikes. They said to one person: "Would you like a normal coffee or your favourite a cappuccino?"

People were offered opportunities to engage in hobbies and activities of their choice. The activity coordinator arranged group activities and individual trips for people. Recently one person had celebrated their birthday by going to a cricket match. One person told us: "We have a lady who comes in and does our nails, we have quizzes and sing-along's. We do exercises, table top games, reminiscence sessions, painting , trips out, a sweet shop and picnic lunches." Another person told us: "We don't have time to get bored".

People's religious needs were met. The service was designed to meet the needs of people from the Christian faith although the registered manager told us that people did not have to be a Christian to live or work there. There was a chaplain who was employed by the service and offered people spiritual guidance and support. There were regular services which people could chose to attend, however people did not have to participate in the services. The registered manager informed us that the service would cater and meet the needs of people of other religions or cultures if these were identified.

People we spoke with told us that they had no complaints and if they did they would speak to a member of staff. One person told us: "I have no complaints, it's lovely here, any of the staff would help you if you had any concerns". The provider had a complaints procedure and we saw that any complaints received were responded to appropriately



## Is the service well-led?

### Our findings

At our previous inspection we had no concerns in how the service was led and we had rated this area as good. At this inspection we found that the service remained good in this area.

The service had a registered manager and we saw that the values of the registered manager were to provide a kind and caring, compassionate service to people who used the service based on the Christian principles. The registered manager was supported by a head of care and senior team members. Staff we spoke with told us that the management team were approachable and supportive. One staff member told us: "I can go to the managers at any time, I feel supported and they are responsive".

The provider had systems to monitor and improve the service based on analysis of incidents and gaining regular feedback from people who used the service, professionals and relatives through regular quality surveys.

We saw that regular quality audits were undertaken throughout the service and when issues were identified action was taken to make the improvements. For example, we saw a medication audit had identified a missing medication. Since the audit staff counted people's medicines on a daily basis to ensure that this did not occur again.

People who used the service were happy with the care and told us they felt the service was well led. One person told us: "I am very happy with my care, the girls are very nice and they can't do enough for you, it is like a home from home." Another person told us: "I love the cleanliness, we are well looked after and there are no smells".

The registered manager knew their responsibilities in relation to their registration with us (CQC) and notified us of significant events that affected people and the running of the service.