

# Cygnet (OE) Limited

# Hollyhurst

## Inspection report

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Date of inspection visit:  
26 October 2021  
28 October 2021  
03 November 2021  
04 November 2021  
05 November 2021

Date of publication:  
08 December 2021

## Ratings

Overall rating for this service	Requires Improvement ●
Is the service safe?	Requires Improvement ●
Is the service well-led?	Requires Improvement ●

# Summary of findings

## Overall summary

### About the service

Hollyhurst is a residential service providing personal and nursing care to 19 people with a learning disability. At the time of the inspection there were 15 people living at the service. Hollyhurst provides accommodation across two buildings with a two person bungalow and a large two storey house with bedrooms and communal areas.

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

Incidents were not always reviewed in a timely way. This delay meant action to keep people safe may not be taken quickly enough. Medicines were managed safely, however, we did find some 'when required' medicine records were not in place. This was rectified immediately.

Staff raised with us that sickness was impacting on staffing levels. We found staffing levels were safe and the service was working on a recruitment and retention plan to reduce the current high levels of agency staff at the service.

The service had improved care and support plans alongside risk assessments to promote a person-centred approach. Staff we spoke with told us these were clear and easy to follow. There was a new management team at the service and staff we spoke with felt they could raise issues and concerns with them. Feedback from relatives was positive relating to the care and support their loved ones received.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the guidance CQC follows to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Based on our review of [key questions of safe and well led, the service was not able to demonstrate how they were meeting some of the underpinning principles of Right support, right care, right culture. The environment of a large (more than 6 people) living in one communal home does not meet the principles of Right support, right care, right culture.

### Right support:

- Model and design of care and setting maximises people's choice, control and independence

### Right care:

- Care is person-centred and promotes people's dignity, privacy and human rights

### Right culture:

- The ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was Good (published September 2020).

#### Why we inspected

The inspection was prompted in part due to concerns received about incident management and staffing levels. A decision was made for us to inspect and examine those risks.

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 coronavirus and other infection outbreaks effectively.

The overall rating for the service has changed from Good to Requires Improvement. This is based on the findings at this inspection.

We have found evidence that the provider needs to make improvements. Please see the Safe and Well-Led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Hollyhurst on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection.

We have identified a breach in relation to safeguarding at this inspection.

Please see the action we have told the provider to take at the end of this report.

Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

#### Follow up

We will request an action plan for the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will 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 well-led?

The service was not always well-led.

Details are in our well-led findings below.

**Requires Improvement** ●

# Hollyhurst

## 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

The inspection was carried out by two inspectors, 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 Expert by Experience contacted eight relatives by phone to request feedback.

#### Service and service type

Hollyhurst 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 registered manager in post. The 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 the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and the local authority safeguarding team. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our

inspection.

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.

During the inspection

We spoke with six people who used the service and eight relatives over the phone about their experience of the care provided. We spoke with nine members of staff including the regional manager, registered manager, nurses, activity co-ordinator, senior support workers, and support workers.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We reviewed additional evidence including training data and quality assurance records. We carried out telephone interviews with a nurse, two bank staff and four support workers. We spoke with two external health and social professionals who were involved with the service.



# 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 now deteriorated to requires improvement.

This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- An effective system to assess, monitor and manage risk was not fully in place to keep people safe.
- We found a serious incident that took place in early July 2021 was not reported to CQC until two months later. An investigation by the service did not take place until late August 2021. This meant that systems and processes were not keeping people safe.
- Safeguarding matters along with incidents and accidents were recorded on the provider's on-line monitoring system. The registered manager told us there was a delay in reviewing of four weeks due to their workload. This could mean any immediate actions to reduce any risks, raise a safeguarding concern or to implement any lessons learnt would not be done quickly enough. We also found this on our last inspection visit in May 2020.

This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- Shortly after our inspection visit the registered manager informed us that incident monitoring and review was now fully up to date.
- All the relatives we spoke with told us they felt their family and loved ones were safe living at Hollyhurst. One relative told us, "I feel he is quite safe, [Name] has improved since being at Hollyhurst."

Using medicines safely

- Medicine were generally managed safely and effectively.
- We identified shortfalls with the recording of topical and when required medicines. This was addressed by the registered manager.
- We found the room containing medicines was clean and well maintained.

Assessing risk, safety monitoring and management

- Systems were in place to effectively monitor and review risks related to the safety of the environment within the home.
- People's care records contained evidence that risks were regularly revised and updated.
- Staff members we spoke with told us that they were given the opportunity to talk and reflect about incidents.

### Staffing and recruitment

- Staff recruitment was undertaken in a safe and effective manner. We saw appropriate checks were in place including Disclosure and Barring Service (DBS) checks.
- The service was providing staffing at safe levels. The service currently had a number of vacancies and was using agency staff.
- The service had an active recruitment procedure and was reviewing methods to improve retention of staff. All staff we spoke with stated that sickness levels was having a big impact on them and that at times staffing was very stretched.
- Agency staff we spoke with said they had been inducted thoroughly before they started work and other staff we spoke with told us regular agency staff were used which gave consistency.

### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.



# 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 now deteriorated to requires improvement.

This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- An effective system was not fully in place to monitor the safety of the service.
- We found that some medicine record shortfalls had not been picked up by the providers monitoring system.

This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- Following the inspection, the registered manager told us that they were up to date with incident reviews and medicine records were now fully in place.
- The service had taken steps to ensure incidents would be reviewed in a timely way going forward.

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

- Staff we spoke with told us there was a positive and improved culture at the service. Staff we spoke with told us the registered manager was accessible and available. One staff member told us, "We had a new manager last year, things are going up. Every area has improved, it's more of a modern service for people now."
- There was evidence of regular staff meetings and ways of seeking views with people who lived at the service. Relatives we spoke with said they were happy with the support and care their loved ones received and they received regular communication from the service.

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 was aware of their responsibility under the duty of candour.
- The registered manager was open and honest about the delays in reviewing incidents. We saw that the provider, when made aware of a significant incident in July 2021 took action to ensure people were safe.

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

- People we spoke with were positive about living at Hollyhurst and about having their views heard.
- The registered manager had put in place processes to engage with people in the running of the service.
- Some relatives told us they couldn't recall completing a satisfaction survey but these had just been sent out prior to our inspection so hadn't all been received.

#### Continuous learning and improving care

- Staff we spoke with told us they were able to raise issues. One staff member said, "Everybody has the opportunity to say what they want to really. If you have something to say that might better the company."

#### Working in partnership with others

- There was evidence in people's care files that the home worked in partnership with a range of professionals to support people's health and wellbeing.
- We spoke with one commissioner who told us they had raised an issue they found with the registered manager. They told us this was addressed by them quickly.

This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA RA Regulations 2014 Good governance
Treatment of disease, disorder or injury	Reviews of incidents were not completed in a timely way. The provider's quality monitoring process did not find gaps we found in medicine records.