



Making Social Care
Better for People

inspection report

CARE HOMES FOR OLDER PEOPLE

Hollies The

**Ferriby Road
Hessle
Hull
East Yorkshire
HU13 0HT**

Lead Inspector
Rob Padwick

Key Unannounced Inspection
25th October 2007 2:00

The Commission for Social Care Inspection aims to:

- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Care Homes for Older People*. They can be found at www.dh.gov.uk or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: www.tso.co.uk/bookshop

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SERVICE INFORMATION

Name of service	Hollies The
Address	Ferriby Road Hessle Hull East Yorkshire HU13 0HT
Telephone number	01482 643293
Fax number	01482 627438
Email address	manager.thehollies@hica-uk.com
Provider Web address	
Name of registered provider(s)/company (if applicable)	Humberside Independent Care Association Limited
Name of registered manager (if applicable)	Mrs Margaret Walker
Type of registration	Care Home
No. of places registered (if applicable)	48
Category(ies) of registration, with number of places	Dementia - over 65 years of age (48), Old age, not falling within any other category (48)

SERVICE INFORMATION

Conditions of registration:

Date of last inspection 25th October 2006

Brief Description of the Service:

The Hollies is a care home providing personal care and accommodation for up to 48 older people, some of whom may have dementia. The home is owned and operated by Humberside Independent Care Association which is a 'not for profit' organisation.

The Hollies is located on a main road in Hessle, west of the city of Hull. There is good access to local shops, public houses and transport.

The home consists of a two-storey purpose built building. All service user accommodation is located on the ground floor. All bedrooms are available for single occupancy and some are 'companion rooms' which are linked by a door and may be suitable for couples, offering flexible use as a twin room or a sitting room. Many of the bedrooms have en-suite facilities.

Residents have use of various communal lounges, a dining room and several courtyard gardens. There is a large formal garden. There is ample car parking at the front of the building.

The standard fees charged by the home range from £425 to £465 with additional charges made for hairdressing, chiropody, toiletries etc.

The Hollies provides information about the home to service users in its Statement of Purpose and Service User Guide.

SUMMARY

This is an overview of what the inspector found during the inspection.

This inspection report is based on information received by the Commission for Social Care Inspection (CSCI) since the last key inspection of the home on 25th October 2006, including information gathered during a site visit to the home

A questionnaire asking for information about the service was sent to the provider before the inspection visit and information from this was included as part of the inspection process. Other information used, included feedback from questionnaires sent out to people living in the home, their relatives and professional staff who know them well, together with official notifications received by the Commission for Social Care Inspection about the home.

The inspection visit for this service lasted for 5 hours and during this period, time was spent talking with people living in the home and observing their daily lives. Other time was spent looking at their care plans and other records and talking to staff and relatives who were visiting. The inspection visit also included a tour of the properties.

What the service does well:

The needs of people living in the home are properly assessed in order to ensure that the service is able to meet them. Support is provided with personal and healthcare in order to ensure that the dignity of people living in the home is maintained and they are able to choose to take part in a variety of activities in order they can have a lifestyle that meets their needs. The home's environment is well maintained and staff are provided with a good training programme to ensure they are able to their jobs. Appropriate management systems are in place to ensure that the welfare of people living in the home is safeguarded.

What has improved since the last inspection?

Care Plans belonging to people living in the home were being regularly reviewed and additional information and risk assessments were included within them to ensure they continued to reflect current needs. The recording of medication administered to people living in the home had been improved so that it was possible to confirm they had been correctly given and more staff had been employed to ensure that their were sufficient numbers on duty to meet the needs of people living in the home. Staff had been provided with further training to ensure they could do their jobs and additional senior staff had been recruited in order to support and strengthen the management team of the home. More activities had been developed to enhance the well being of

people living in the home and improvements to the cleaning programme for the home had taken place to ensure that it remained fresh. Improvements to the building had included an upgrade to some of the lounges and bedrooms belonging to people living in the home.

What they could do better:

Further information about the interests and life histories of people living in the home should be incorporated into their support plans so staff have more information about these and that opportunities are extended for providing person centred support. All staff should received training on the values and principles of Social Care in order to ensure that people living in the home are treated with dignity and respect at all times. Staff should be encouraged to engage further with people living in the home, in order to maximise opportunities for them to be involved in making decisions about their lives. The environment of the home should be regularly monitored in order to ensure it remains free from offensive odours.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from enquiries@csci.gsi.gov.uk or by contacting your local CSCI office. The summary of this inspection report can be made available in other formats on request.

DETAILS OF INSPECTOR FINDINGS

CONTENTS

Choice of Home (Standards 1-6)

Health and Personal Care (Standards 7-11)

Daily Life and Social Activities (Standards 12-15)

Complaints and Protection (Standards 16-18)

Environment (Standards 19-26)

Staffing (Standards 27-30)

Management and Administration (Standards 31-38)

Scoring of Outcomes

Statutory Requirements Identified During the Inspection

Choice of Home

The intended outcomes for Standards 1 – 6 are:

1. Prospective service users have the information they need to make an informed choice about where to live.
2. Each service user has a written contract/ statement of terms and conditions with the home.
3. No service user moves into the home without having had his/her needs assessed and been assured that these will be met.
4. Service users and their representatives know that the home they enter will meet their needs.
5. Prospective service users and their relatives and friends have an opportunity to visit and assess the quality, facilities and suitability of the home.
6. Service users assessed and referred solely for intermediate care are helped to maximise their independence and return home.

The Commission considers Standards 3 and 6 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

3 and 6

People who use this service experience **good** outcomes in this area. People living in the home had been involved in the processes of moving into the home and their needs assessed as part of the admission process in order to ensure the service was suitable for them. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

People living in the home that we spoke to confirmed they had made an active choice about moving into the Hollies. Information provided by the manager indicated that people considering moving into the Hollies are encouraged to visit as part of the home's admission process and that they are provided with written information about the service, to help them make a decision about it. The case files of the two most recently admitted people contained assessments of their needs, which the manager had either carried out herself or obtained before they had moved in, so she could confirm that the service was suitable to meet their needs. The manager confirmed the service does not admit people for intermediate care.

Health and Personal Care

The intended outcomes for Standards 7 – 11 are:

7. The service user's health, personal and social care needs are set out in an individual plan of care.
8. Service users' health care needs are fully met.
9. Service users, where appropriate, are responsible for their own medication, and are protected by the home's policies and procedures for dealing with medicines.
10. Service users feel they are treated with respect and their right to privacy is upheld.
11. Service users are assured that at the time of their death, staff will treat them and their family with care, sensitivity and respect.

The Commission considers Standards 7, 8, 9 and 10 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

7, 8, 9 and 10

People who use this service experience **good** outcomes in this area. Staff were sensitively promoting the dignity and rights of people living in the home in order to ensure their individual health and personal care needs were appropriately met. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

People living in the home indicated their health and personal care needs were being met and information about these were included in individual care plans that detailed the type of support that was required from staff. The three care plans that we inspected all contained information about a range of the emotional, psychological and physical needs of the individual's concerned, together with details about their life histories and particular interests. A recommendation is made that information from these is incorporated into their individual care plans, in order that staff are provided with more information about these and that person centred opportunities are further developed to enable the well being of people living in the home to be maximised and enhanced. Questionnaires sent out as part of the inspection process were

generally positive about the service. A relative stated that staff were "very patient with the residents", (the) "general care and attention cannot be faulted", whilst a Community Psychiatric Nurse stated "I feel staff try to maintain their individuality as much as they can". The psychiatric nurse indicated that two people who had recently moved in to the home had "settled well" following effective "joint working" with her, whilst a doctor visiting at the time confirmed staff contacted him appropriately for advice and assistance about concerns they might have. The case files contained evidence of daily recordings by staff about people living in the home, together with regular monthly evaluations and reviews of the care plans in order to ensure they continue to reflect current needs. A requirement was made following the last inspection visit to ensure known risks to people living in the home are better documented and evidence was seen in the case files inspected that appropriate action had been taken to implement this. Staff were observed sensitively responding to people living in the home and discussion with them indicated they were familiar with their changing needs. A relative commented that "excellent care (was) being found to be given, e.g. one to one feeding even when we arrive unexpectedly", "As --- has slowly declined...they have adapted to steadily provide increased care".

Staff responsible for the administration of medication to people living in the home had received training on this aspect of practice and policies and procedures were available to ensure they had appropriate guidance to follow. Evidence was seen that the manager was carrying out an audit of the staff skills to ensure they remained competent in their abilities and a random inspection of the medication records confirmed these were being satisfactorily kept.

Daily Life and Social Activities

The intended outcomes for Standards 12 - 15 are:

12. Service users find the lifestyle experienced in the home matches their expectations and preferences, and satisfies their social, cultural, religious and recreational interests and needs.
13. Service users maintain contact with family/ friends/ representatives and the local community as they wish.
14. Service users are helped to exercise choice and control over their lives.
15. Service users receive a wholesome appealing balanced diet in pleasing surroundings at times convenient to them.

The Commission considers all of the above key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

12, 13, 14 and 15

People who use this service experience **good** outcomes in this area. People living in the home were being supported to make choices about their daily lives in order that their lifestyle wishes and needs could be met. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

People living in the home have a range of mixed needs and observation and discussion with them indicated that staff were supporting them to make choices and decisions about their lives. A recommendation was made at the last inspection that the programme of activities be developed to ensure the social needs of people living in the home were met and information provided by the manager indicated that care staff are now to undertake "active in age" training and that the provider organisation had registered with a National Association about further opportunities for this to be developed. Since the last inspection, an activities coordinator had been appointed to the home, however this post was now vacant although a replacement was being sought. Evidence was seen that a programme of activities including themed nights, outside entertainments, bingo, quizzes, and personal manicures that regularly took place and discussion with manager indicated that a Catholic priest visited one individual and that another was supported to attend church services, in order

that their spiritual needs could be met. Some of the more independent people living in the home indicated however, concerns over the loss of control of their lives and the manager was reminded of the need for staff to engage with them, in order that opportunities are enhanced for them to participate in decisions about life in the home. The service had a visitor's policy to enable people living in the home to maintain contact with friends and families. Relatives who were visiting indicated they had no concerns and this was generally confirmed in comments received from them as part of the inspection process. Information provided by the manager indicated the home had obtained a Local Authority "heartbeat" award for the provision of healthy meals. Case files inspected contained evidence of monitoring of aspects of nutrition and the home's quality assurance systems contained evidence that following consultation with people living in the home, the variety of meals provided had been changed. People living in the home confirmed they were able to make choices about what they wanted to eat, although some indicated the temperature of the meals could sometimes be improved.

Complaints and Protection

The intended outcomes for Standards 16 - 18 are:

- 16. Service users and their relatives and friends are confident that their complaints will be listened to, taken seriously and acted upon.
- 17. Service users' legal rights are protected.
- 18. Service users are protected from abuse.

The Commission considers Standards 16 and 18 the key standards to be.

JUDGEMENT – we looked at outcomes for the following standard(s):

16 and 18

People who use this service experience **good** outcomes in this area. The concerns of people living in the home were being taken seriously and staff had received training on the protection of vulnerable adults to ensure people living in the home could be safeguarded from abuse. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

People living in the home that we spoke to were generally satisfied with the service and that their concerns were taken seriously. The service had an acceptable complaints policy and procedure and evidence was seen in the complaints log of appropriate action taken to resolve the four complaints received since the last inspection visit. Comments received from Social Services staff were largely satisfactory and one stated that "families have stated (that) care has improved", whilst a relative comment indicated the service was good at "welcoming relatives and visitors, being open to suggestions and following up our concerns". Policies and procedures were available to ensure people living in the home were safeguarded from abuse and discussion with staff and inspection of their files confirmed that training on this aspect of practice had been provided and that they were familiar with the correct action to take. In the year preceding this inspection visit, no Safeguarding referrals had been made to Social Services to investigate, although one had been made on the day of this inspection visit. A random check of the money kept on behalf of people living in the home confirmed that satisfactory records were being maintained.

Environment

The intended outcomes for Standards 19 – 26 are:

19. Service users live in a safe, well-maintained environment.
20. Service users have access to safe and comfortable indoor and outdoor communal facilities.
21. Service users have sufficient and suitable lavatories and washing facilities.
22. Service users have the specialist equipment they require to maximise their independence.
23. Service users' own rooms suit their needs.
24. Service users live in safe, comfortable bedrooms with their own possessions around them.
25. Service users live in safe, comfortable surroundings.
26. The home is clean, pleasant and hygienic.

The Commission considers Standards 19 and 26 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

19 and 26

People who use this service experience **good** outcomes in this area. The home was comfortable, clean and being appropriately maintained to ensure that people living there had an environment that was safely meeting their needs. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

The home was comfortable, clean and being appropriately maintained and people we spoke to confirmed it was meeting their needs. Regular checks of equipment were being carried out to ensure the safety of people living in the home and a delivery of new chairs arrived during this unannounced inspection visit in order to upgrade and improve their comfort. Items of specialist equipment had been obtained to maximise the independence of people living in the home and ensure their individual needs could be met. Plans had been implemented in relation to a previous requirement concerning the management of continence and the manager indicated staff were to receive

training on this aspect of practice and that plans were in place to deliver additional training on infection control. Case files contained individual continence support plans, where this need had been identified, and cleaning staff in the home had obtained NVQ qualifications to ensure they were able to do their jobs. A vacancy for the post of a head housekeeper had recently arisen and discussion with the manager confirmed plans were in place to actively recruit for this position. Evidence was seen of improvements to the home's environment including an upgrade to some of the lounges and bedrooms, however a slight malodour was noted in one of the dining areas in the service. The home's quality assurance systems contained evidence of feedback from relatives and professionals about this aspect of practice together with action plans developed to ensure this is more effectively managed. A recommendation is made about this.

Staffing

The intended outcomes for Standards 27 – 30 are:

- 27.** Service users' needs are met by the numbers and skill mix of staff.
- 28.** Service users are in safe hands at all times.
- 29.** Service users are supported and protected by the home's recruitment policy and practices.
- 30.** Staff are trained and competent to do their jobs.

The Commission consider all the above are key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

27, 28, 29 and 30

People who use this service experience **good** outcomes in this area. The home's recruitment process was safeguarding the people living in the home, and staff had received appropriate training to ensure they were equipped to meet their needs. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

People living in the Hollies who we spoke to indicated their needs were being met by the staff and comments received from their relatives and professionals associated with the service were largely positive nature. One stated that the "majority of staff have a caring attitude towards the residents, particularly those who rarely have visitors", whilst another stated the "general care and attention cannot be faulted...(Staff are) always at hand". Evidence was seen that action had been taken to ensure sufficient staff were on duty to meet the needs of people living in the home as previously required, although the manager indicated the service currently had vacancies for night staff, for which she was advertising. The provider organisation has a strong training and induction programme to ensure staff are equipped with the skills needed for doing their jobs and the files of the three staff members that we inspected all contained evidence of this, together with regular supervision and details of their personal and professional development. Confirmation was seen of attendance on an appropriate induction and foundation programme, together with NVQ training and other courses relevant to the individual needs of people

living in the home. The service had been awarded "Investors in People" status which is to be commended and information provided by the manager indicated that all new staff are to undertake training on the underlying values and principles of Social Care to ensure people living in the home are treated with dignity and respect at all times. A recommendation is made in these respects. The service had recruitment policies and procedures to ensure staff were safe to work with people living in the home. The three staff files that we inspected all contained evidence of this being appropriately followed with evidence of checks carried out in relation to staff identity, the Protection of Vulnerable Adults list (POVA First) and the Criminal Records Bureau together with other required documentation.

Management and Administration

The intended outcomes for Standards 31 – 38 are:

- 31.** Service users live in a home which is run and managed by a person who is fit to be in charge, of good character and able to discharge his or her responsibilities fully.
- 32.** Service users benefit from the ethos, leadership and management approach of the home.
- 33.** The home is run in the best interests of service users.
- 34.** Service users are safeguarded by the accounting and financial procedures of the home.
- 35.** Service users' financial interests are safeguarded.
- 36.** Staff are appropriately supervised.
- 37.** Service users' rights and best interests are safeguarded by the home's record keeping, policies and procedures.
- 38.** The health, safety and welfare of service users and staff are promoted and protected.

The Commission considers Standards 31, 33, 35 and 38 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

31, 33, 35 and 38

People who use this service experience **good** outcomes in this area. Management systems were in place to ensure that welfare of people living in the home was safeguarded. This judgement has been made using available evidence including a visit to this service.

EVIDENCE:

Comments received as part of the inspection process indicated the home was being well run and a professional associated with the service stated the "management and senior staff encourage and promote skill and knowledge sharing". The manager is suitably qualified and has substantial experience of working with the group of people living in the home and evidence was seen that the service had developed its management team since the last inspection with the addition of further senior staff members. A series of regular staff meetings were taking place to ensure effective communication and direction of

the service and the home's Quality Assurance systems contained evidence of feedback from people living in the home and their relatives, with action plans developed from these to ensure it was meeting its aims and objectives. Owing to the mixed levels of need experienced by people living in the home, the manager indicated the service relies on individual one to one sessions with them rather than having formalised meetings to ensure they are informed of decisions about the home. A recommendation is made that systems are further developed, in order that opportunities are maximised for people living in the home to be involved in making decisions about their lives and that staff are encouraged to engage with them about these. Records of money kept on behalf of people living in the home were being accurately kept to ensure their financial interests were safeguarded and a random sample of the home's maintenance records confirmed that appropriate checks were being carried out to ensure their health and safety.

SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Care Homes for Older People have been met and uses the following scale. The scale ranges from:

- 4** Standard Exceeded (Commendable) **3** Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls) **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion

"N/A" in the standard met box denotes standard not applicable

CHOICE OF HOME	
Standard No	Score
1	X
2	X
3	3
4	X
5	X
6	N/A

HEALTH AND PERSONAL CARE	
Standard No	Score
7	3
8	3
9	3
10	3
11	X

DAILY LIFE AND SOCIAL ACTIVITIES	
Standard No	Score
12	3
13	3
14	3
15	3

COMPLAINTS AND PROTECTION	
Standard No	Score
16	3
17	X
18	3

ENVIRONMENT	
Standard No	Score
19	3
20	X
21	X
22	X
23	X
24	X
25	X
26	3

STAFFING	
Standard No	Score
27	3
28	3
29	3
30	3

MANAGEMENT AND ADMINISTRATION	
Standard No	Score
31	3
32	X
33	3
34	X
35	3
36	X
37	X
38	3

Are there any outstanding requirements from the last inspection? NO

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action

RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations
1	OP7OP7	The Registered Person should incorporate further information about the interests and life histories of people living in the home into their support plans in order that staff are provided with more information about these and that person centred opportunities are further developed to enable the general well being of people living in the home to be maximised and enhanced.
2	OP26OP26	The Registered Person should ensure that the environment of the home is regularly monitored in order to ensure it is free from offensive odours.
3	OP30OP30	The Registered Person should ensure all staff in the home have received training on the underlying values and principles of Social Care to ensure people living in the home are treated with dignity and respect at all times.
4	OP33OP33	The Registered Person should ensure staff are encouraged to engage with people living in the home in order to maximise opportunities for them to be involved in making decisions about their lives.

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