



Inspection Report on

Hollies

**The Hollies Day Centre
34 Caecerrig Road Pontarddulais
Swansea
SA4 8PB**

Date Inspection Completed

30 June & 01 July 2022

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About Hollies

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	City and County of Swansea Adults and Children's Services
Registered places	23
Language of the service	English
Previous Care Inspectorate Wales inspection	16/01/2020 & 23/01/2020
Does this service provide the Welsh Language active offer?	Yes. The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

The Hollies is a care home registered for a maximum of 23 people. It provides a service for individuals diagnosed with dementia and/ or high physical support needs who require personal care, on a short/ stay respite basis. Although some people have lived at the service for a longer period. The service consists of two units of fifteen and eight bedrooms. Improvements are needed in developing a dementia friendly environment.

Managers lead by example. Action is taken promptly to address any issues experienced by those using the service. There are consistently good systems in place to monitor and improve standards. Staff have real confidence in managers and are supported to carry out their roles effectively.

People have a positive experience at the service, and clearly benefit from their time at The Hollies. Staff know people well and what really matters to them. They respect people's individuality and are kind and compassionate in their approach to care. Care workers provide appropriate care and regularly monitor people's safety and well-being. People are supported to be as healthy as possible. People have input, as needed, from specialist health services. Care workers support people to keep occupied and to maintain relationships that are important to them.

Well-being

The Hollies has a warm, homely welcoming atmosphere where care workers prioritise the care and support of its residents. People, relatives, and professionals have confidence in the care provided. Care workers understand people and support them in a dignified, respectful way. People's individual care and support is identified within personal plans that are regularly reviewed. More focus is needed on identifying and recording personal outcomes within these plans. People receive the specialist support they need from health services. Systems are in place to support the management of medication. There are appropriate measures in place to reduce COVID-19 and other infection risks. The responsible individual (RI) and management team monitor the standards of care being provided.

People have choice and control over how they live. Care records identify people's care preferences and routines, which care workers know and respect. Risk assessments are present and support staff to keep people safe. People are supported to stay connected with family and friends. People and relatives engage in the assessment and personal planning and review process. Relatives are encouraged to visit loved ones; we saw they were made to feel welcome during the inspection visit. Staff work hard to promote people's wellbeing by regularly interacting with them and adapting the way they communicate with people.

People live in a service where they are safe and happy although improvements are needed in developing a dementia friendly environment. We saw domestic staff ensure the home is clean and fresh throughout. A stringent, well-organised system for maintaining safe systems of work is in place. The service undertakes appropriate security and fire safety checks to make sure people remain as safe as possible. People can have privacy in their own rooms or encouraged to socialise in communal areas. Improvements are needed to develop contrasting colour schemes throughout the building as well as safe outdoor space to promote the independence for people living with dementia.

The service helps protect people from harm and neglect. We found people feel safe whilst living at The Hollies. The service is successful in providing respite to people who are unsafe to go home, confirmed by social care professionals with a good knowledge of the service. We spoke to several people who told us they felt safe. We observed others who were comfortable in their surroundings. The service maintains appropriate staffing levels to meet people's care and support needs. Care workers regularly monitor people's safety and wellbeing. The service's safeguarding policy reflects Wales Safeguarding Procedures. Staff understand their responsibility to report concerns about people's welfare.

Care and Support

Caring and attentive staff, support people knowledgably and well, this was observed throughout the inspection. One individual living with dementia could no longer speak English reverting to her native language. Care workers communicated through body language, gestures, touch, and facial expressions, along with basic phrases in their language. Other language resources to aid communication are also used. This person looked settled in the service. One other person living at the service said, *“staff are always very kind to me, not sure what I would do without them”* A visiting professional told us *“A real human touch to how they understand people’s needs, all staff know the people well”*. We found people to be clean, comfortable, and content in their home. They had easy access to refreshments and items that were important to them. Records show and observation evidenced people have regular interactions with care workers.

Risk assessments support the individuals care and support needs within their personal plans. Staff update these regularly to ensure they remain accurate. They include detailed information about people’s care preferences, routines and the health and safety equipment they need. There are good levels of detail capturing people’s social and family histories. Overall risk assessments are in place and active however the need for training around a better understanding of risk assessments was evident, this was discussed with the manager. On-going monitoring is good in relation to key areas such as falls, behaviours, skin integrity and diet/ fluid intake. Handwritten personal plans are hard to understand, it is also difficult to establish what is the current situation with the individual due to reviews and additional entries. This along with a better understanding of outcomes within personal plans and how to record them were discussed with the manager.

Care workers access medical and specialist services in promoting people’s health and well-being. Records show care workers access medical attention in response to significant changes or concerns about people’s health. Care recordings show people receive appropriate support to maintain a suitable diet and healthy skin. People choose from a daily menu and catering staff are clear about people’s special dietary needs.

Good medication management systems are in place. There is a detailed medication policy to support safe practice and staff have training and regular competency checks. Consistent actions are taken by managers in response to any medication errors by staff. This includes additional training, reflective practise, competency checks and where appropriate disciplinary action. People receive ‘as required’ medication if needed to promote their comfort and well-being. We advised to contact the GP in relation to one person and not to use “post it” notes to inform staff of a change in frequency of medication. Regular audits show good overall compliance with the safe management of medicines.

Environment

People live in an environment where they are happy. People say they feel comfortable and happy living at The Hollies. Comments include *“I am very happy here”* and *“it’s a lovely place to live”*. We saw people living with dementia unable to communicate verbally at ease in their surroundings. Care workers are confident in using distraction techniques and comfortable using emotional support if people become agitated. A social care professional with a good working knowledge of the service said, *“there is always a lovely home feel and they welcome me as a social worker”* and *“I have placed many people into respite in The Hollies and every one of them came away asking if that could be a permanent placement”*.

The service needs to improve in promoting a dementia friendly environment. The service provides personal care and support for a high number of people living with dementia. The service is very well managed, with staff demonstrating a real understanding in dementia care. However, to ensure the home further develops into a dementia friendly environment improvement to colour schemes throughout the building should be considered. Communal corridors failed to provide colour contrasts between walls and handrails. Bedroom doors could be painted in assorted colours to assist people to identify their own bedrooms. We found there is no dedicated safe external space for people living with dementia in the short stay/respite unit. The Hollies is a well-situated home within beautiful large grounds. To access these grounds, people need staff support to cross a car parking area. This means for extended periods of time up to 8 individuals living with dementia are restricted to specific internal areas of the home. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Overall, there are effective measures in place to reduce health and safety risks and to maintain consistently good standards of hygiene and infection control. However, there is a communal toilet upstairs without a sink, with no way of washing hands this could place individuals at risk. Any visitors sign a visitors’ book and Public Health Wales guidelines are followed with regards to the routine COVID-19 testing of staff and visitors. Keypads are fitted to doors leading to potential hazards, preventing people accessing these areas without staff support. Window openings are restricted to prevent falls from height. Private and communal areas are clean, hygienic, and generally free from clutter. Although, equipment was placed in front of a fire evacuation chair in the upstairs landing. This was later removed following a discussion with the manager. There is also water ingress causing wallpaper peeling in an upstairs corridor. Maintenance records show checks are conducted to identify and address any issues; we saw these checks are, overall, up to date. There are good fire safety arrangements in place, including regular checks of the fire alarm system. Staff are fully aware of what to do in the event of a fire. There are personal evacuation plans in place for people.

Leadership and Management

Managers prioritise people's needs and have strong governance arrangements in place ensuring the service runs smoothly. The service has an experienced, professional management team highly regarded by people, staff, and external professionals. A social care professional said, *"the care is excellent there"*. The service has corporate policies and procedures which are clear and fit for purpose. Staff demonstrate a good understanding of these including safeguarding procedures. People have access to a statement of purpose (SoP) and guide to service. We discussed the SoP with the manager as it requires updating. Both documents are available in Welsh on request. There is a clear complaints procedure in place, and complaints addressed appropriately. The RI completes three monthly visits and six-monthly quality of care reviews. Audits undertaken evidence monitoring is ongoing and timely action taken to address any practice issues to ensure people receive quality care.

The service maintains appropriate staffing levels to meet people's care and support needs. Despite increased pressures because of the pandemic, there is a strong sense of teamwork amongst staff who continue to support each other through challenging times. Rotas show staffing levels are maintained as planned, in line with the service's statement of purpose. The Local Authority are providing additional staffing support to ensure staffing levels are safe. Communication in the service is good and care workers receive updates about people's well-being during shift handovers. This is usually conducted by care staff rather than the management team.

Good staff support, recruitment, and induction processes are consistent although training arrangements need to improve. Personnel records satisfied regulatory requirements in relation to staff recruitment. Care workers have regular support and supervision and can access senior staff daily to discuss their work and wellbeing. They can also access both internal and/ or external wellbeing support if needed. Care workers told us *"The managers door is open if we want to speak to them"* and *"I have excellent support, they are very kind and supportive"*. Training is predominantly through e-learning and in-house training. We saw gaps in staff training records relating to safeguarding, health and safety and dementia care. Senior staff are completing regular competency checks in areas such as manual handling and administration of medication. Assurances have been given that training will be prioritised. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

Regulation	Summary	Status
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36	There were gaps in staff training records in relation to mandatory training. Ensure staff complete training in relation to safeguarding, health and safety and dementia care.	New
44	The environment needs to improve to ensure it promotes the wellbeing of people living with dementia and sight difficulties. Improvements are needed to the colour schemes in communal and bathroom areas as to develop colour contrasts to assist people to identify handrails, toilet seats and different areas of the building. In addition there is no accessible safe external space for people living with dementia to access without staff supervision.	New

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