

# 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 well-led?

Good ●

# Summary of findings

## Overall summary

### About the service:

Holt House is a care home providing accommodation and personal care to up to 32 people, some of whom were living with dementia. There were 26 people using the service at the time of the inspection.

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

People living at the home and relatives felt the service was safe. There were enough staff available and correct staff recruitment procedures were followed. Risks were effectively managed at the home and accidents and incidents were monitored to prevent them reoccurring in the future.

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. Some mental capacity assessments had not been completed where restrictions were in place, however the registered manager took appropriate actions to ensure these were implemented.

Everybody we spoke with told us there was good management and leadership at the home. There were systems in place to monitor the quality of service through audits, meetings and satisfaction surveys. The home worked in partnership with other organisations to ensure positive outcomes for people. The home used an electronic system to record when people had received personal care, although these were not always fully completed by staff. The registered manager was aware of this and was addressing this with staff.

### Rating at last inspection:

The last rating for the service was good (published 10 October 2017).

### Why we inspected

This inspection was prompted by a review of the information we held about this service. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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

### Follow up:

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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 was safe.

Details are in our safe findings below.

### **Is the service well-led?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# Holt House

## 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 Health and Social Care Act 2008.

#### Inspection team:

The inspection was carried out by 1 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.

#### Service and service type:

Holt House is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager:

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection, there was a registered manager in post.

#### 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 professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us

annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection:

We spoke with 6 people who used the service and 3 relatives about their experience of the care provided. We also spoke with 5 members of staff including the registered manager.

We reviewed a range of records. This included 5 people's care plans, 2 staff recruitment files, staff training records and records associated with the provider's quality monitoring systems.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection this key question was rated good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

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

- The provider had processes in place to safeguard people from abuse. People living at the home and relatives said they felt the service was safe. One person said, "It's very good indeed and it feels safe. The carers know what they are doing." A relative said, "It's fantastic. Perfect. (Person) is 100% safe."
- Staff understood about safeguarding and said they had received training. One member of staff said, "It's about protecting people and making sure they are not in any danger. Types of abuse could be financial, emotional, or physical. Emotional abuse could be people being withdrawn and doesn't want to speak."
- A safeguarding policy and procedure was in place, explaining what needed to be done if abuse was suspected. Information was also displayed in the reception area if people needed to contact the local authority about any concerns.
- Accidents and safeguarding incidents were monitored, and records maintained.

Assessing risk, safety monitoring and management; Preventing and controlling infection

- The provider had systems in place to ensure the safe management of people's identified risks. People's care plans contained risk assessments regarding the care and support they received. Where any risks were identified, control measures were in place.
- Regular checks of the building were carried out to ensure the environment was safe. A fire risk assessment had been completed and actions undertaken.
- The home was clean and tidy, and we observed domestic staff carrying out their duties throughout the day. Staff were observed wearing personal protective equipment when needed.

Staffing and recruitment

- The provider ensured there were enough staff employed to care for people safely.
- Everyone said there were enough staff to deliver the care people needed, although at the time of the inspection a lot of agency staff were used. A member of staff told us, "At the moment staffing is fine. We work it out between us, and it seems to work." Another member of staff said, "We do use agency staff, but we are able to meet people's needs."
- Staff were recruited safely, with all the necessary procedures followed including interviews, seeking references and carrying out relevant checks. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

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

The Mental Capacity Act 2005 (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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorized under the MCA. We checked whether the service was working within the principles of the MCA.

- The service was working within the principles of the MCA. DoLS applications were submitted to the local authority as required. Staff understood about DoLS and when these were required.
- Some mental capacity assessments had not been completed where restrictions were in place, however the registered manager took appropriate actions to ensure these were completed during the inspection.

#### Using medicines safely

- There were arrangements in place for the safe management of medicines.
- Medicines were stored in a secure room which we saw was locked at all times. We observed some drink thickeners were not stored safely. We spoke with the registered manager about ensuring these were locked away.
- Medication records were completed accurately by staff with no missing signatures, including those for controlled drugs and topical creams.
- When people needed medicines on an 'as and when required' basis (PRN), there were protocols in place to ensure staff only administered these medicines when they were needed.
- People living at the home and relatives said they received their medicines safely and did not have any concerns.

# 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 our last inspection this key question was rated good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care; engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The home used an electronic system to record when people had received personal care, although these were not always fully completed by staff. The registered manager was aware of this and was addressing this with staff through staff meetings and themed supervisions.
- There were systems in place to monitor the quality of service. Residents and relatives meetings were held in order to gather people's views.
- The provider used satisfaction surveys to ask people for their views and therefore improve service delivery.
- Staff meetings were also held to enable staff to discuss the problems they might have affecting their work.
- The management team carried out audits to ensure there was appropriate oversight of the service. Monitoring was also undertaken at provider level.

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

- At the time of the inspection, there was a registered manager in post who was responsible for the day to day running of the home. Additional support and oversight were also given by the provider and team leaders.
- The provider knew to submit statutory notifications to CQC as required.
- It is a legal requirement for the ratings from the last inspection to be displayed on any websites operated by the provider and at the office location. We saw the ratings were displayed at the home and on the provider website.

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

- The staff team spoke of a positive culture at the service and said they enjoyed their roles. One member of staff said, "I think everything is going great. I felt welcomed and everyone is lovely. It is a good place to work." Another member of staff said, "I absolutely love it and wish I had done it years ago. It is a good place to work. There is good team work, and we all work well together."
- Everybody we spoke with said they felt the service was well-led. One member of staff said, "The management are great here. Nothing bad to say. We are well supported, and they [managers] are approachable." Another member of staff added, "Yes there is good management. I feel valued and they ask



me for my opinions."

#### Working in partnership with others

- The service worked in partnership with other agencies as required, including local authorities and social work teams. Dieticians, district nurses and speech and language therapists were all involved with the care people received and visited the home regularly.
- Prior to our inspection, we sought feedback about the home from various health care professionals, who provided us with an update about their involvement with the home and any good practice they had identified. The feedback we received was positive.