

Diva Care Limited

# Hyperion 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

Hyperion House is a care home with nursing for up to 59 older people and people living with dementia. At the time of this inspection there were 14 people living at the service.

Hyperion House has a range of communal areas for people to use, including lounges, a secure garden and a dining room. People's bedrooms were spread over two floors and people were able to freely move around the home. Due to the occupancy numbers, people were all being supported in the newer purpose built areas of the home.

People's experience of using this service and what we found  
People felt safe and at home at Hyperion and spoke positively about the care and support they received. Relatives had peace of mind regarding their loved one's care.

Nursing and care staff understood people's needs and how to assist them to protect them from avoidable harm. Detailed person-centred care plans and risk assessments were in place, which provided staff with clear guidance on how to meet people's needs.

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.

People's medicines were managed safely and appropriately. Nursing staff ensured people received their medicines as prescribed. Staff were responsive to people's changing medical needs.

The service had infection control processes and systems in place to reduce the risk of people contracting COVID-19. At the time of our visit the service was closed to visitors and new admissions following two positive COVID-19 tests, the service were following local area COVID-19 guidance.

The management team and provider had systems in place to assess and monitor people's health and wellbeing. The registered manager reviewed all incident and accident records to ensure appropriate action had been taken and to identify trends to reduce the risk of recurrences.

People, their relatives and staff spoke positively about the management of the home and the registered manager. Everyone had experienced impact from the home's short closure in December 2020 and people and staff discussed how the registered manager and provider had supported them.

The registered manager and provider kept people updated weekly on events in the home and kept relatives updated with how their loved ones were getting on. People and their relatives were often local to Hyperion House or had lived in the local area. People and their relatives felt involved with Hyperion House and discussed the support they received from the service.

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 the last inspection

The last rating for this service was Good (published 1 May 2018).

#### Why we inspected

We undertook this focused inspection as part of our regulatory processes following Hyperion House's reopening in January 2021 following a significant outbreak of COVID-19.

#### Follow up

We will continue to monitor information we receive about the service until we 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?

Good ●

The service was safe.

We were assured the service were following safe infection prevention and control procedures to keep people safe.

### Is the service well-led?

Good ●

The service was well led.

Details are in our well-led findings below.

# Hyperion 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.

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

This inspection was carried out by one inspector.

#### Service and service type

Hyperion House 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 manager registered with the Care Quality Commission. This means that they 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 took place on 6 and 7 April 2021 and was unannounced.

#### What we did before the inspection

We reviewed all the information we had received about this service since the last inspection. This included information of concern, information from the provider and feedback from commissioners of the service and healthcare professionals. 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. We took this into account when we inspected the service and made the judgements in this report.

#### During the inspection

We spoke with the registered manager, the deputy manager, two nurses, a housekeeper and five care staff. We also spoke with seven people who use the service, three people's relatives and a healthcare professional. We reviewed the care plans and risk assessments of five people. We reviewed records relating to infection control and how the service supported people.

# 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 remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Systems and processes to safeguard people from the risk of abuse

- People were safe at Hyperion House. Comments included, "I am happy here, I feel safe" and "This is my home, I am safe here."
- Staff were able to describe the arrangements for reporting any allegations of abuse relating to people using the service and the contact details for reporting a safeguarding concern were available.
- The registered manager was aware of their responsibilities in reporting any concerns or incidents of abuse. Safeguarding processes had been followed appropriately where necessary.

Assessing risk, safety monitoring and management

- People's needs were assessed, and staff knew how to protect people from avoidable risks. One person was at risk of falls. Staff worked with the person to reduce the risk of falls, including reviewing the equipment they used and seeking the advice of external professionals. The person was supported to make decisions and take positive risks to maintain their independence.
- One person was being cared for in bed. There were clear care plans in relation to supporting the person to protect and maintain the health of their skin. Staff understood the support this person required, including support to reposition the person to reduce pressure on their skin. Records showed that staff assisted the person to change their position in accordance with their plan of care.
- Staff had guidance on how to assist people who were at risk of choking. For one person, there were clear plans in place personalised to the person on how staff should assist them and how the person had been supported to take a positive risk alongside staff and healthcare professionals.
- People could be assured that the building, equipment used to meet their needs were safe. The registered manager and staff ensured the building was maintained and that all equipment was serviced and fit for use. There were clear fire safety processes in place, including personalised emergency evacuation plans for each person.

Using medicines safely.

- People's prescribed medicines were managed safely. There were robust systems in place for the safe storage, administration and disposal of people's prescribed medicines. Where people were prescribed time specific medicines, to manage their condition, these were administered appropriately.
- Staff kept a clear record of people's medicine stocks. These were checked daily and audited by nursing staff and the management team. These audits also identified any errors or instances where people had not received their medicines as prescribed. This enabled staff to take effective action to maintain people's health and wellbeing and to reflect on their own practice.
- People were supported to administer their own medicines where appropriate. Staff assisted people with

the supply of these medicines. One person told us, "They help me with my tablets. I have no concern, they know what they're doing."

#### Staffing and recruitment

- People were protected against the employment of unsuitable staff because robust recruitment procedures were followed. Checks had been made on relevant previous employment as well as identity and health checks. Disclosure and Barring Service (DBS) checks had also been carried out. DBS checks are a way that a provider can make safer recruitment decisions and prevent unsuitable people from working with at risk groups.
- People were supported by enough staff who had been recruited safely. We observed staff spending time with people throughout our inspection. People told us there was enough staff deployed to meet their needs. Comments included, "They look after me, there is always someone around", "Staff come quickly if I want them" and "I would rather be at home; however I can't fault the staff. Some of them are exceptional."
- Staff told us there were enough staff and time to meet people's needs in the way they liked. Comments included, "Staffing is good at the moment. At present the nice thing is we have more time to spend one on one with the residents" and "It's getting busier, however we have enough staff and support to manage."

#### 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.

#### Learning lessons when things go wrong

- Systems were in place for staff to report and record any accidents and/or incidents. The registered manager worked with healthcare professionals to assess and manage people's risks.
- The registered manager and staff used observations and supervisions to identify and follow up on any shortfalls. Staff were supported to reflect on their own practice and identify actions or support they required to develop their personal skills. Staff spoke positively of the support they received from the registered manager and provider.



# 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 remained the same. 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

- The registered manager had systems and process in place to monitor and improve the quality of care people received. These were completed by the registered manager, the deputy manager and nursing staff. These included clinical governance audits in relation to people's nutritional needs, falls, skin integrity and the use of medicines used to assist people with their behaviours. The registered manager used information from these systems and processes to ensure people's needs were being met and any required changes to these were responded to effectively.
- The registered manager, deputy manager and nurses also carried out a comprehensive range of audits on the management of people's prescribed medicines, infection control (including COVID-19 measures), incidents and accidents and people's care plans. Audits were carried out every month.
- The registered manager had adapted their audits during the pandemic to focus on areas they had identified as important, such as PPE usage and cleanliness. Clear risk assessments were in place for each person in relation to COVID-19 and safe relative visits.

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

- People's relatives spoke positively of the service and told us that communication had been good during the pandemic, which put their minds at rest. The registered manager provided weekly updates to all relatives about the home, including updates on COVID-19 measures and visiting. Comments from relatives included, "All of us have an excellent relationship with the staff with regard to communication, care and attention at this difficult time. I would recommend the home" and "They have been great at communicating with us, involving us."
- Care staff were provided with clear information about people's needs and the provider's expectations. Staff informed us they were involved in discussions about changes and were given the information and reassurance they required during the pandemic. One member of staff told us, "We were given numbers for people we can talk to. I haven't because we have great support here, you can talk to [registered manager], [deputy manager] and [provider]."

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

- Staff were supported by the registered manager and provider and understood their individual roles in supporting people. Comments included, "The managers do everything they can to help us" and "We all

know what we need to do, we get good information. We've had some new residents and we always get the information we need to support them."

- The provider and registered manager had a clear overview of the training needs of all staff. They had ensured staff received Covid-19 specific training during the pandemic. The registered manager, deputy manager and senior staff (with line management responsibility) used one to one meetings with staff to discuss staff members' needs and any training they would like.
- The registered manager was fully aware of their legal responsibility to notify CQC of notifiable events. The provider understood their responsibility to be open and honest when an incident had occurred. They had demonstrated this when following up concerns; they had ensured people and their representatives, as well as appropriate authorities, had been informed.

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

- People and relatives spoke positively about the ethos of Hyperion House and the caring culture of staff. Comments included, "I know the staff here, it is my home, it's fantastic and I wouldn't be anywhere else" and "I cannot fault the staff. I have been really impressed by their skills and empathy."
- Care staff spoke positively about the caring ethos and culture the registered manager instilled in the home. Staff spoke positively about how the provider and registered manager supported them and their wellbeing.

Working in partnership with others

- The registered manager and provider recognised the importance of working with other agencies and seeking their support. The registered manager and provider had followed guidance in relation to positive COVID-19 tests, which included restricting admissions to the service for 28 days.