

Desmond House Limited

# Desmond House Limited

## 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

Desmond House Limited is a residential care home providing personal care to up to 18 people. The service provides support to people with mental health needs, learning disabilities and autism. At the time of our inspection 16 people with mental health needs were using the service.

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

At the time of the inspection, the location did not care or support anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

### Right care

The provider had made improvements since the last inspection. Infection, prevention, and control was well managed. Staff were trained and understood their responsibilities for maintaining high standards of cleanliness. Staff managed medicines consistently and safely. Staff were competent and trained in the administration of medication. Effective safeguarding systems were in place. Safeguarding concerns were managed consistently and promptly. All staff had an awareness and understanding of abuse and felt comfortable with raising concerns about their own or other people's safety.

### Right Support

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. There was enough competent staff on duty to care for people safely. People were supported to remain safe. Risk assessments were person centred and creative in relation to people's safety. Staff were aware of people's risks and how to manage them. Staff understood their responsibilities to raise concerns and report accidents and incidents. Lessons were learned and communicated to staff.

### Right Culture

The service had a positive culture that was person centred and empowering. Interactions between staff and people was personalised and relaxed. The provider had clear governance systems in place that identified and managed risk through audits and action plans. These were used to monitor the services performance and drive improvements.

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

### Rating at last inspection

The last rating for this service was requires improvement (published 4 February 2020). At our last inspection we recommended the provider made improvements in infection, prevention and control and quality monitoring. At this inspection we found the provider had made improvements in these areas.

### Why we inspected

We carried out an unannounced inspection of this service on 18 December 2019 and the 09 January 2020. We undertook this focused inspection to confirm the improvements had been made. This report only covers our findings in relation to the Key Questions safe and well-led which contain those improvements.

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 COVID-19 and other infection outbreaks effectively.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Desmond House Limited 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.

# Desmond House Limited

## 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.

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 completed 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

Desmond House Limited 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. Desmond House Limited is a care home without nursing care. 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 received about the service since our 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 9 people who used the service to ask about their experience of care provided. We also spoke with the registered manager, the deputy manager and 3 members of care staff. We reviewed a range of records. This included 2 people's care records and a range of medicine records. We looked at 2 staff files in relation to recruitment and supervision. We reviewed a variety of records relating to the management of the service. We also spoke with 1 professional who visited 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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

### Preventing and controlling infection

At our last inspection we recommended the provider consider best practice guidance on infection, prevention and control and updates their practice. The provider had made improvements.

- We were somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises. Some parts of the environment required decorating and some furniture in the lounge required replacing. The provider had an action plan in place for refurbishment work which they were working towards. The provider immediately ordered furniture for the lounge area and are waiting for delivery.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.

### Visiting in care homes

People were supported to meet with their visitors in line with current government guidance. Visits to the service were encouraged, whilst staff ensure appropriate precautions were followed to help prevent the spread of infection

### Assessing risk, safety monitoring and management

- Risks associated with people's care had been identified and plans were in place to minimise risk occurring. Staff told us they had the right information to support people safely. One person said, "They [Person's name] sometimes act around, but staff know them really well and keep me safe when they are around."
- Risk assessments were person centred and reviewed regularly. The registered manager and staff showed empathy and understanding, recognising people's lifestyle choices. One person was supported to keep pet hamsters by sharing information with other organisations and professionals in an imaginative and innovative way.

- Personal emergency evacuation plans were available and detailed the level of support each person would require in the event of an emergency evacuation.

Systems and processes to safeguard people from the risk of abuse

- The provider had systems in place that helped reduce the risk of abuse. Staff knew how to respond and report abuse. A staff member said, "I would report any abuse, straight to the manager and higher if I needed to."
- People we spoke with told us they felt safe. Comments from people included "I feel very safe" and, "Staff keep us safe; it is good here."

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 MCA 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 authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment; Learning lessons when things go wrong

- There were enough staff to ensure people received safe care. We observed staff engaging in a meaningful and positive way. One person said, "Staff are kind and respectful and they always check in with you."
- The provider had a system in place to recruit staff safely. This included full employment checks before staff started working in the service.
- The provider had a process in place to review all accidents and incidents, they were responded to appropriately and lessons were learned to drive improvements.

Using medicines safely

- People's medicines were managed safely and administered as prescribed. Instructions for medicines to be given at specific times were available for staff. This reduced the risk of people experiencing adverse side effects from the medicines not working as intended.
- People who were prescribed 'as and when' (PRN) medicines, had a protocol in place and staff had written why it was required and how much was administered.
- Staff were trained and supported in their role to administer medicines. Records showed staff had their competencies checked and received annual updates for medication.



# 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 we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection we recommended the provider consider current guidance on keeping complete and accurate records and effectively monitors systems to ensure it keeps up to date with current practice. The provider had made improvements.

- An effective system was now in place which monitored the quality and safety of the service through a robust auditing system. This information was used to improve the service.
- The registered manager and staff had a clear understanding of their roles and how this contributed to the good level of care people received. Staff told us they could raise concerns with the registered manager, and they would be supported.
- The registered manager understood their responsibility to notify CQC about incidents that affected people's safety and welfare. We had received notifications relating to significant events that occurred within the service.

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

- The service had an open and honest culture. We observed a calm, relaxed and friendly atmosphere. Staff described moral as good. A staff member said, "We are a good team, and everyone gets on, we all support each other."
- The management team were committed to providing good quality care and involved people in their care and support. People told us they had confidence in the managers and any issues raised were dealt with promptly.
- The registered manager demonstrated they were committed to continuous improvement of the service through their audits and action plans with achievable time frames.

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 understood their responsibility to inform people and relevant others in the event something went wrong with people's care. If things did go wrong apologies were given to people, lessons were learned, and these were used to improve the service.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The provider engaged and involved people using the service. People told us resident meetings took place. Comments included "Yes, they are a good thing," and, "They [Deputy manager] said, if there was anything we are not happy with, or that could be done better, please tell us."
- Staff had regular team meetings and felt supported and listened to. They told us it was a great place to work. A member of staff said, "I like to think I have made a difference to someone's life in a positive way, I like to see them [People] get better."
- The service worked in partnership with GP's, community nurses and other health care professionals. One professional who visited the service said, "I have no concerns at all, staff are helpful and knowledgeable, and always very accommodating."