

Kisimul Group Limited

# An Diadan 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

An Diadan House is a residential care home which can support up to nine people in one adapted building. The service specialises in supporting people with learning disabilities and/or autism. At the time of this inspection there were nine people using the service.

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

People were safe and well looked after by staff. Staff had received training to safeguard people from abuse and knew how and when to report safeguarding concerns if these should arise.

The provider made sure there were enough staff, with the right skills and experience, to support people. They carried out recruitment checks on new staff to make sure they were suitable to support people.

Risks to people had been assessed and plans were in place to manage these in an appropriate way. Staff understood the risks to people and what action to take to make sure these were minimised. This included instances when people displayed behaviour which may have challenged them and/or others.

Health and safety checks were carried out of the premises and equipment at regular intervals. The premises were clean and tidy. Staff followed current practice to reduce infection and hygiene risks at the service. Visitors to the service were given information to help them reduce the risk of catching and spreading infection.

People were supported to take their prescribed medicines.

The provider had arrangements in place to make sure any accidents and incidents were investigated, and people kept involved and informed of the outcome.

Relatives were positive about the service and the outcomes experienced by their family members. Staff knew people well and were enthusiastic about helping people to achieve good outcomes. Relatives and staff said the home manager, was open, approachable and responsive. The home manager was open about when things went wrong and proactive about putting things right.

The home manager encouraged people, relatives and staff to have their say about how the service could improve and acted on this feedback. The home manager had clear priorities for continuously improving the service to enhance the quality of people lives. They had access to resources and support from the provider to make the improvements needed.

There were systems in place to monitor and assess the safety and quality of the service. When issues had been found through checks they had been addressed promptly.

The service worked proactively with other agencies and healthcare professionals. The provider acted on their recommendations to improve the quality and safety of the service for people.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of right support, right care, right culture. People were supported to have as much choice and control as possible over how their care and support needs were planned and delivered. People were involved in making decisions about how the service was designed and delivered. The provider ensured people's rights were respected and promoted a culture within the service where people were supported in the least restrictive way as possible.

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 good (published 29 January 2019).

#### Why we inspected

The inspection was prompted in part due to concerns received from Ofsted about one of the provider's other services regarding unexplained injuries on people using the service and poor joint working with other agencies. We also identified a pattern in the types of notifications CQC received from the provider. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe and well-led sections of this full report.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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.

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.

# An Diadan 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 Care Act 2014.

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 undertaken by two inspectors.

#### Service and service type:

An Diadan 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. An Diadan House does not provide nursing care.

The current home manager, who joined the service in October 2020, had recently submitted their registered manager application to CQC. Once their application is processed, they along with the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection:

We announced this inspection the day before our site visit due to the types of behaviour that people might display, to assess risk and ensure the safety of the inspectors.

#### 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. We reviewed statutory notifications submitted by the provider. Statutory notifications contain information providers are required to send to us about significant events that take

place within services. 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 two people who used the service. We observed interactions between people and staff. We also carried out checks of the premises. We spoke with the home manager and three care support workers. We reviewed three people's care records, medicines stock and records and some of the records relating to the management of the service.

#### After the inspection

We spoke with three relatives by telephone about their experiences of the service. We continued to speak with the home manager and seek clarification about the evidence gathered. We also reviewed additional documentation relating to the management of 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Feedback we received from relatives indicated people were safe and well looked after by staff. One relative said, "We wouldn't have left [family member] there if we didn't think [family member] wasn't safe. We would like [family member] to stay there for years to come."
- Staff knew how to safeguard people from abuse. They had received appropriate training and understood how and when to report safeguarding concerns to the appropriate person or authority.
- The home manager liaised appropriately with the local authority when a safeguarding concern was raised about people.

Assessing risk, safety monitoring and management

- Risks to people's safety and wellbeing had been assessed and plans were in place to manage these in an appropriate way. For people whose behaviour might challenge them and/or others, there was detailed guidance for staff about how to reduce the risk of this behaviour presenting and causing harm to the person or others.
- Staff understood the risks to people and knew what action to take to make sure these were minimised to keep people safe. Records maintained of incidents when people displayed behaviour that might have challenged them and/or others indicated staff followed guidance as directed to deescalate and positively redirect people in the least restrictive way possible.
- We observed staff were alert to people's whereabouts and supported people to move safely when needed.
- The provider undertook health and safety checks of the premises and any issues found through these checks were dealt with appropriately. The premises and equipment had been maintained and serviced at regular intervals to make sure they remained in good order and safe for use.
- Staff received training to deal with emergency situations and events if these should arise.

Staffing and recruitment

- There were enough staff to support people. Staffing levels were planned based on the level of support people needed each day. There were suitably skilled and experienced staff on duty on each shift.
- The provider operated safe recruitment practices. They carried out appropriate checks on staff that applied to work at the service to make sure only those suitable were employed to support people.

Using medicines safely

- People's records contained information about their prescribed medicines and how they should be supported with these, to help staff support people to take these in a timely and appropriate way.

- Our checks of medicines stocks, balances and records showed people consistently received the medicines prescribed to them. Medicines were stored safely and appropriately.
- Managers regularly audited medicines stock and records and checked staff's competency to make sure they were managing and administering medicines safely.

#### Preventing and controlling infection

- Visits from relatives had recommenced at the service following the lifting of some COVID-19 restrictions and staff made sure these was done in a safe way. Visitors were given clear and detailed information to help reduce the risk of them catching and spreading infections.
- Staff used personal protective equipment (PPE) safely and effectively.
- The premises were clean. Cleaning took place at regular intervals throughout the day, to prevent the spread of infection.
- The provider promoted safety through the layout and hygiene practices of the premises.
- The provider was accessing COVID-19 testing and had engaged in the vaccination programme for people and staff.
- The provider's infection prevention and control policy was being updated at the time of this inspection to make sure this reflected current guidance.
- The provider had plans in place to manage an infection outbreak at the service.
- Staff followed food hygiene practices when preparing, serving and storing food, to reduce risks to people of acquiring foodborne illnesses.

#### Learning lessons when things go wrong

- There were systems in place for staff to report and record accidents and incidents.
- Senior staff investigated accidents and incidents and took appropriate action when needed to reduce the risks of these reoccurring.
- Senior staff discussed accidents and incidents with the staff team to identify learning from these to help improve the quality and safety of the support provided to people.



# 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 has 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.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Relatives gave us positive feedback about the service and the outcomes experienced by their family members. One relative said, "[Family member] is in a lovely home...[family member] has a lovely life there." Another relative told us, "[Family member] loves the home and the staff. [Family member] is so happy...staff are so caring, loving and understanding."
- Staff knew people well and enthusiastic about helping people to achieve good outcomes. One staff member said, "I am passionate about my job...[the provider] introduced positive behaviour support training and this allowed us to stop the use of physical intervention. The impact has been amazing as we haven't used intervention for over a year. I feel this has improved our ability to understand how people are communicating with us and reduced [people's] anxiety and frustration."
- Relatives told us the home manager, who had joined the service in October 2020, had made a positive impact at the service. One relative said, "We were concerned about management in the past...the new manager has come in and things are more settled for [family member]." Another relative told us, "I wasn't sure about [home manager] at first but he's been brilliant and he really knows his stuff and he's impressed me in so many ways."
- Staff told us the home manager had an open-door policy and they felt comfortable speaking to them if they had an issue or concern.
- People, relatives and staff were provided opportunities at regular intervals to have their say about the service and how it could improve. Staff used people's preferred method of communication to gain their views so people would be included in having a say in how the service could improve.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; continuous learning and improving care

- The home manager and the staff team were clear about their roles and responsibilities for providing high quality care to people.
- There were systems in place to monitor and assess the safety and quality of the service. There were regular audits and checks of key aspects of the service. Where issues were found through these audits and checks they were addressed promptly and improvements were made.
- The home manager had recently submitted their registered manager application to CQC. They understood their responsibility for meeting regulatory requirements and notified us promptly of events or incidents involving people. This meant we could check appropriate action was taken to ensure the safety

and welfare of people.

- The home manager had clear priorities and objectives for how the service would continue to improve. These were focused on people and their needs and enhancing the quality of their lives. The home manager told us they were confident they would have access to the resources and support they needed from the provider to make the changes and improvements identified.

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 home manager was open about when things went wrong and proactive about putting things right. They investigated all accidents and incidents that happened and made sure people and relatives were kept involved and informed of the outcome.

Working in partnership with others

- Good relationships had been developed with a range of healthcare professionals involved in people's care. Staff made sure recommendations and advice from healthcare professionals was used to design the care and support provided to people. This helped to ensure that care and support was up to date with current practice in relation to people's specific needs.