

HICA

# Prospect House - Care Home

## 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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### About the service

Prospect House is a residential care home comprising of 4 small units and 2 'independent living' flats. At the time of our inspection, it was providing personal care to 20 people. The service can support up to 22 people.

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

#### Right Support:

We have made a recommendation about staffing; people received the care and support they needed to be safe. However, staff appeared rushed. Care became task focused rather than person centred. Staff supported people to take part in activities and pursue their interests in the local area. One person was supported to work in the voluntary sector and lived in their own flat within the service. People had a choice about their living environment and were able to personalise their rooms. Staff communicated with people in a way that met their needs. People were supported with their medicines in a way that promoted their independence and achieved the best possible health outcome. 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.

#### Right Care:

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. Staff understood how to protect people from poor care and abuse. Staff had training on how to recognise and report abuse and they knew how to apply it. People's care, treatment and support plans reflected their range of needs, and this promoted their well-being and enjoyment of life. Staff and people collaborated to assess risks people might face, where appropriate, staff encouraged and enabled people to take positive risks.

#### Right Culture:

People were supported by staff who understood best practice in relation to the wide range of strengths, impairments, or sensitivities people with a learning disability and/or autistic people may have. This meant people received compassionate and empowering care that was tailored to their needs. Staff placed people's wishes, needs, and rights at the heart of everything they did. People and those important to them were involved in planning their care. Staff ensured the risks of a closed culture were minimised so that people received support based on transparency, respect, and inclusivity.

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 last inspection

The last rating for this service was good (published 12 December 2018)

#### Why we inspected

This inspection was prompted by a review of the information we held about this service and due to the length of time since the service was last inspected.

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

#### Recommendations

We have made a recommendation about staffing levels. The provider needs to review this to ensure there are sufficient staff on duty to respond to people's changing needs.

#### 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.

# Prospect House - Care Home

## **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 carried out by 3 inspectors and an Expert by Experience. An Expert by Experience also made calls to relatives the following day. 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

Prospect 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. Prospect House 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 had 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 used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We spoke with 5 people who use the service and 7 relatives about their experience of care provided. We spoke with 10 members of staff including the operations manager, the registered manager, the deputy manager, the housekeeper and 6 care staff.

We reviewed a range of records. This included 4 care records and multiple medication records. We looked at other records relating to the management of the service including recruitment, supervision, and systems for monitoring quality.

# 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 good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

### Staffing and recruitment

- There were not always sufficient staff on duty to meet people's needs. However, people received their 1-1 care hours, and we did not find any evidence that this impacted on outcomes for people. However, we observed staff were rushed and unable to supervise all the people at times. Despite this, we observed staff interacting with people and people told us staff were kind and they felt well cared for.

We recommend the provider reviews their systems and processes for managing staffing levels and updates their practice accordingly.

- Safe recruitment and selection processes were followed. Staff files contained all the necessary pre-employment checks which showed only fit and proper applicants were offered employment.

### Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's safety and welfare were assessed appropriately. Risks associated with people's care had been identified and plans were in place to minimise risk occurring. Staff told us they contained enough information to support them to care for someone safely.
- People, including those unable to make decisions for themselves, had as much freedom, choice, and control over their lives as possible because staff managed risk to minimise restrictions. A relative said, "They [Staff] are very focused on the needs of [Person's name], it is never too restrictive, just the right balance."
- Staff managed the safety of the living environment and equipment in it well, through checks and actions to minimise risk.
- Accident and incidents were analysed by the provider to look for themes and trends. Any learning was shared with staff to prevent future incidents.

### Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. Relatives told us people were safe, staff were kind and provided good care.
- Staff had training on how to recognise and report abuse and they knew how to apply it. People told us they felt safe, staff were good and looked after them well.

### Using medicines safely

- Medicines were managed safely. Staff followed effective processes to assess and provide the support people needed to take their medicines. This included where there were difficulties with communicating and when medicines were given covertly.

- People who received 'as and when required' medication had guidance in place and staff had written why it was required and how much was administered.
- The service ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism, or both).

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.
- Staff clearly recorded assessments and best interest decisions for people that were assessed as lacking capacity.

#### Preventing and controlling infection

- The service used effective infection, prevention, and control measures to keep people safe. Staff were trained and understood their role and responsibilities for maintaining high standards of cleanliness and hygiene. Some areas of the service required decoration, and some flooring in a bathroom required replacing. The provider had an action plan in place to address this.

#### Visiting in care homes

- People were supported to meet with visitors. Relatives told us there was no restriction on visiting and they could visit when they wanted.



# 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 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.

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

- Members of the management team were visible in the service. They were approachable and took a genuine interest in what people, staff, family and other professionals had to say. Relatives told us things had improved. One relative said, "They [Registered manager] are very proactive and always speaks when we visit."
- Staff felt respected, supported, and valued by senior staff which supported a positive and improvement-driven culture. A staff member said, "This is not just a care home it is their home, and we are very person centred."
- Staff felt able to raise concerns with managers without fear of what might happen as a result. Staff told us they could report things in confidence and there is a system in place to report anything of concern.
- The provider had a quality assurance system in place regarding, reporting, investigating, and learning from incidents when things went wrong. Any required actions were fed into the service and provider governance meetings.

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 provider demonstrated an open and transparent approach and understood their responsibilities under the duty of candour.
- The registered manager was aware of their obligations for submitting notifications to CQC, as required by law.

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

- The registered manager had the skills, knowledge, and experience to perform their role and a clear understanding of people's needs and oversight of the service they managed.
- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support.
- Staff were able to explain their role in respect of individual people without having to refer to documentation, and were knowledgeable about the people they cared for.

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

- The provider sought feedback from people and those important to them and used the feedback to develop the service. Relatives told us they received questionnaires about the service.
- The service worked well in partnership with other health and social care organisations, which helped to give people using the service a voice and improve their well-being. A professional visiting the service said, "The service is very responsive and always acts on any issues, staff are positive and very friendly."