

Miss Debra Jane Collinson

D C Homecare

Inspection report

Battisford Farmhouse
Plympton
Plymouth
PL7 5AT

Tel: 01364388503

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20 May 2019
21 May 2019
28 May 2019

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20 June 2019

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service: D C Homecare is a domiciliary agency. It provides personal care and domestic support to people in their own homes. At the time of the inspection the agency was providing personal care to 16 people.

People's experience of using this service:

People received support that was tailored to meet their needs. People's preferences and routines were recorded and staff ensured people were given choice on a daily basis about how their needs were met.

Staff cared for the people they supported and enjoyed spending time with them. Relatives confirmed staff had built strong relationships with the people they supported; this was aided by the consistent staff teams each individual had in place.

Systems and processes were put in place to help ensure people were safe and the care they received was delivered by trained staff, and based on best practice.

Regular checks were completed of records, and feedback was collected from people, relatives and staff. These helped ensure the service was able to act on any areas requiring improvement.

Relatives and staff told us they felt the service was well led. They felt confident any concerns or ideas they shared would be listened to and acted upon.

More information is in the full report.

Rating at last inspection: Good. Report published on 14 December 2016.

Why we inspected: This was a planned inspection based on the previous rating.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, we may inspect sooner.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe

Details are in our Safe findings below.

Good ●

Is the service effective?

The service was effective

Details are in our Effective findings below.

Good ●

Is the service caring?

The service was caring

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well-led

Details are in our Well-Led findings below.

Good ●

D C Homecare

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

One adult social care inspector.

Service and service type: D C Homecare is a domiciliary care service that provides personal care and support to people living in their own homes in the community. This includes people of all ages with physical disabilities and may be living with dementia.

Not everyone supported by D C Homecare received a regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided. At the time of the inspection, the service was supporting 16 people with their personal care.

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:

We gave the service 48 hours' notice of the inspection visit because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in.

Inspection site visit activity started on 20 May 2019 and ended on 28 May 2019. We visited the office location on 20 May 2019 to see the manager and office staff; and to review care records and policies and procedures.

What we did:

Before the inspection we reviewed:

- ☐ notifications of incidents we had received. A notification is information about important events which the service is required to send us by law
- ☐ feedback and information we had received about the service.

During the inspection we:

Met and spoke with four relatives

Telephoned four staff members

Reviewed four people's care records.

Reviewed records of accidents, incidents, compliments and complaints.

Reviewed staff recruitment and training.

Reviewed audits and quality assurance reports.

Is the service safe?

Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives knew who to contact if they felt their loved one was at risk.
- People were supported by staff who regularly updated their safeguarding training. Staff told us they knew how to recognise and report abuse and felt confident they would be listened to.
- If people became worried or anxious, they told us staff always understood how best to support and reassure them.

Assessing risk, safety monitoring and management

- Staff had a good understanding of how to keep people safe and their responsibilities for reporting accidents, incidents or concerns.
- People were supported to take risks to retain their independence whilst any known hazards were minimised to prevent harm.
- Risk assessments were in place and updated to guide staff how to reduce any risks to people.
- People and relatives told us the staff followed people's preferred routines for entering and leaving their homes and made sure they were safe before leaving.

Staffing and recruitment

- Recruitment practices were in place and records showed appropriate checks were undertaken to help ensure the right staff were employed to keep people safe.
- People and their relatives told us they and they were mostly supported by a consistent staff team and were informed which staff member to expect.
- A system was in place for staff to contact the office when starting each visit. This helped ensure staff safety and helped the office staff stay up to date with people's needs.

Using medicines safely

- Some people required assistance from staff to take their medicines.
- People's care plans described which medicines they took and what support they needed.
- Staff had received training and competency checks before they were able to administer people's medicines.
- Records were kept of medicines staff administered. These were checked regularly to help ensure any errors were identified and any actions put in place to reduce future errors.

Preventing and controlling infection

- Staff had received infection control training.
- People told us staff handled food safely and helped keep their homes clean and tidy.

Learning lessons when things go wrong

- Staff were aware of how to report any incidents or accidents. These were reviewed by senior staff who ensured any learning was shared with individual staff members or with the whole staff team.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

Good: People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed, and a care plan drawn up before people received a service.
- Staff were introduced to the person and supported to deliver their care package by senior staff until they felt confident to do so themselves.

Staff support: induction, training, skills and experience

- People and their relatives told us they thought staff were knowledgeable and well trained.
- Staff confirmed their training was regularly updated and any further training they requested was provided.
- New staff completed an induction and shadowed existing staff. They were then observed by senior staff to help ensure they were competent before working alone.

Supporting people to eat and drink enough to maintain a balanced diet

- People said the staff knew what they liked and disliked regarding food and drink. They confirmed staff offered choice and always left any food or drink to hand, as required by the person, before leaving.
- When supporting people with meals and fluids was a part of their care package, people received the support they needed.

Staff working with other agencies to provide consistent, effective, timely care

- The service worked alongside local community and medical services to support people and maintain their health.

Adapting service, design, decoration to meet people's needs

- People's service was designed around their individual needs. People, relatives and staff gave examples of when rotas were changed and adapted to ensure people's preferences were met.

Supporting people to live healthier lives, access healthcare services and support

- People told us the staff responded promptly to any health or wellbeing concerns.
- They also confirmed staff supported them to make and attend appointments, if required.

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

- People told us their consent for care was sought and consent to their care plans were recorded into their care files.
- People told us staff were willing and always asked what they wanted them to do. One person said; "They know me well and exactly how I like things done."

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People and their relatives all agreed the staff were respectful, kind and courteous. One person commented; "They are always kind and polite to me. We get on well as they know me."
- It was clear when talking to staff members that they enjoyed spending time with the people they supported and valued their time together. Staff comments included; "It helps we stay with the same people then we get to know them well" and "I always make sure things are done how she likes them."
- Relatives confirmed staff respected and took care of people's personal belongings and their home. Relatives all said the staff were caring. One commented; "They went the extra mile for me when I needed extra support."
- All the people, relatives and staff we spoke with gave us positive feedback about the caring nature of the service, quality of the staff and thoughtful support they received. The registered manager arranged a Christmas meal when staff gave up some of their own time to support people take part.

Supporting people to express their views and be involved in making decisions about their care

- Staff described how they involved people daily in making decisions about their care. For some this meant learning their preferred routines.
- Relatives confirmed the agency staff were flexible if the need arose.

Respecting and promoting people's privacy, dignity and independence

- People and their relatives confirmed staff respected people's privacy and dignity.
- Staff were keen to support people to the best of their ability. They provided examples of how staff supported people to maintain or regain their independence. Including comments that staff never rushed them and they would take their time to enable them to do as much for themselves as possible. This helped people to be as independent as possible.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

Good: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People had care plans that clearly explained how they would like to receive their care and support. These were reviewed and updated regularly, in consultation with people and their relatives, to help ensure people's wishes were being met.
- People's communication needs were known and understood by staff. Support plans identified people's communication needs and the registered manager ensured people had access to the information they needed in a format they could understand. This approach helped to ensure people's communication needs were known and met in line with the Accessible Information Standard (AIS). The AIS is a framework making it a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand information they are given.

Improving care quality in response to complaints or concerns

- Everyone we spoke to said they were aware of how to complain and were happy with the response when they had raised a complaint or concern in the past.
- Systems were in place to address any concerns raised. The service had responded appropriately to any issues. Learning took place as a result to avoid any repetition.

End of life care and support

- The service was not providing end of life care to anyone at the time of our inspection.

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

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The registered manager had a visible daily presence in the service and led very much by example.
- The registered manager talked passionately about providing person centred support to people that enabled them to maintain or develop skills. This passion was shared by the staff members we spoke with. One staff member told us, "I enjoy helping people to stay in their own homes."
- The registered manager was open and honest about where improvements were required and what action they intended to take, as a result. For example, they had plans to include a LGBTQ+ policy as well as holding discussions with staff to ensure they understood about people needs in relation to the protected characteristics described under the Equality Act.

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

- We did not find any unmet regulatory requirements. The service had sent us notifications about events which they were required to do by law.
- There was a clear ethos of team work. All staff agreed that there were systems in place to ensure everyone was clear of their role. Staff comments included; "I feel well supported."
- People and their relatives told us they felt there was a positive culture within the staff team.
- Staff gave examples of when they had been given opportunities to develop their role and responsibility, which had also benefited the service.
- Supervisions, appraisals and spot checks were used to check staff were meeting the standards required by the service.

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

- People and their relatives told us they were asked for their views of the service.
- Staff were encouraged to share their views about the service and any suggestions they made they felt would be listened to.
- People, relatives and staff told us they thought the service was well led. Staff confirmed they enjoyed working for the service. One staff member told us, "I love working for them (The company)."

Continuous learning and improving care

- Checks were regularly completed on all aspects of the service by senior staff.

- The registered manager had introduced a computerised system which enabled them to check all worked planned had been completed.
- Checks helped identify where improvements could be made to the service or to an individual's care.

Working in partnership with others

- People and their relatives told us the agency worked well in partnership with them and their family member.
- The registered manager and staff told us how they contacted and worked closely with other professionals to help ensure people received the right support to meet their needs.
- People's care plans clearly described advice from other professionals and staff had good knowledge of this information and how they should support people to follow it.