

Dayspring Care Ltd

Dayspring Care Ltd

Inspection report

50 Cowper Avenue
Tilbury
Essex
RM18 8AS

Tel: 07852190221

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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

Dayspring Care Ltd is a supported living and domiciliary care service providing personal care. At the time of our inspection, the service was only providing care under its 'supported living' arm.

People lived in shared houses within three 'supported living' schemes in the town of Tilbury in Essex. Staff were on site 24/7. The aim of the service is to enable people to live as independently as possible. At the time of our inspection, six people were using the service.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

People felt safe. Staff used risk assessments and care plans to support people's individual needs; these were reviewed regularly to ensure they reflected people's current care and support needs. Staff had received safeguarding adults from abuse training and knew how to act on any concerns. Safe recruitment systems were in place to ensure suitable staff were employed. People benefitted from a consistent team of staff which enabled continuity of care. People received their prescribed medicines by trained staff. Effective infection control processes were in place. The provider had ensured practices were updated during the COVID-19 pandemic.

Staff felt valued and well supported. Newly appointed staff received an induction and on-going training and supervision to develop their skills and knowledge.

People were supported to maintain good health and access health care professionals. Where required, people were supported with their nutritional needs.

People and their relatives spoke positively about the kind, caring attitude of staff and were satisfied with the care and support they received. Staff treated people with dignity and respect and people's independence was promoted.

The ethos of the service was to provide individualised, person centred care which promoted people's health and wellbeing. People's needs were met through assessments and support planning. Care plans were person centred, detailing people's preferences and how they liked to be supported. People were consulted over their care and support needs and 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.

The service was well led. The registered manager and manager provided clear leadership and were

committed to providing high quality care. Systems were in place to monitor the quality and safety of the service.

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

Rating at last inspection

This service was registered with us on 22/11/2018 and this is the first inspection.

Why we inspected

This was a planned inspection.

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?

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 ●

Dayspring Care Ltd

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.

Inspection team

The inspection was completed by two inspectors.

Service and service type

This service provides care and support to people living in three 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

Notice of inspection

This inspection was announced. Due to the pandemic, we gave a short period notice of the inspection to enable us to collate as much information as possible virtually to minimise the time spent by the inspection team visiting the provider's office.

Inspection activity started on 27 May 2021 and ended on 15 June 2021. We visited the office location on 15 June 2021.

What we did before the inspection

We reviewed information we had received about the service. 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. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and three relatives about their experience of the care provided. We spoke with four members of staff including the registered manager, manager and support workers.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We reviewed feedback received from a professional about their experience of working with the service.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The service had a safeguarding policy and designated safeguarding lead.
- Staff had completed safeguarding training and were aware of their responsibility to report any concerns. One member of staff said, "I would report [concerns] to management. If I wasn't listened to, I would go to the authorities such as the Police."
- People and their relatives said they felt safe with the staff who supported them. Feedback included, "I feel safe" and, "I feel [name] is safe and well looked after. I know they are in the safest hands."
- The registered manager was aware of their responsibilities for reporting concerns to the local authority and to CQC.

Assessing risk, safety monitoring and management

- Risks to people were assessed and managed.
- People's care records included risk assessments which identified the risks associated with people's daily living and provided guidance for staff on how to reduce these. The registered manager told us, "We take very seriously risk management processes and educate our staff on them. Safety is very paramount in the line of work we do."
- Risk assessments were reviewed regularly to ensure they were up to date. Any changes in people's needs, for example following hospital discharges or changes to prescribed medicines, were communicated to staff and people's care plans were updated. This meant new care instructions were immediately available.
- Staff were aware of how to report any changes about people's care and support needs and could call for additional support from management at any time.

Staffing and recruitment

- There were enough staff to meet people's needs.
- People received support from a consistent team of staff which enabled continuity of care.
- Recruitment processes ensured people were protected from the risk of unsuitable staff being employed. This included checks to ensure staff were of good character and suitable to work for this type of service.

Using medicines safely

- Systems were in place for the safe management of medicine.
- Care plans clearly recorded the support people required to take their prescribed medicines. This included medicines to be administered 'as and when required' (PRN).
- Medicine administration records (MAR) were used to record when people had taken their medicine.
- Staff were trained and assessed as competent to administer medicines.

- The registered manager carried out regular audits of the medicine systems to ensure medicines were being managed safely.

Preventing and controlling infection

- Systems were in place to ensure effective infection control processes.
- Staff had received training in infection prevention and control. This included updated training in response to the COVID-19 pandemic.
- Staff had access to sufficient supplies of personal protective equipment (PPE).
- The provider was accessing testing for staff in line with current guidance.

Learning lessons when things go wrong

- The provider had systems in place to record and monitor incidents and accidents.
- The registered manager informed us there had no significant incidents since the service had become operational. Where an incident had occurred, appropriate action had been taken. This included sharing information with staff to mitigate the risk of reoccurrence.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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 care and support needs were assessed prior to them using the service to make sure they could be met.
- People's needs continued to be assessed and reviewed to ensure the care they received met their needs and choices, helped achieve good outcomes, and supported people to have a good quality life.
- People told us said they received personalised care and staff knew how they wanted to be supported.
- People's protected characteristics under the Equalities Act 2010 were identified as part of the assessment process. This included people's religious beliefs, backgrounds and personal preferences.

Staff support: induction, training, skills and experience

- There were enough staff to meet people's needs, and people were supported by a consistent staff team.
- Newly appointed staff received an induction to the service.
- Staff completed training to enable them to acquire the knowledge and skills to fulfil their role. They told us they felt they had all the training they needed to meet people's care needs. The manager told us, "When I do an assessment, I take into account the knowledge and skill levels required so I can check staff have the relevant skills and knowledge to support people."
- People and relatives told us they felt staff had the skills and knowledge to meet their care and support needs.
- Staff received regular supervision and observations of staff practice was undertaken. Staff told us the registered manager and manager were always approachable for support and advice.

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

- Where required, people were supported with eating and drinking.
- Staff had been trained in nutrition and hydration.
- No one currently using the service was at risk of malnutrition or had any specific dietary or cultural requirements.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked collaboratively with other agencies and professionals to support people to maintain their health and wellbeing; for example, social workers, GPs and community psychiatric teams.
- Where required, people were supported to access health care appointments. One person said, "Staff come to appointments with me." Relatives told us they were kept informed if their family member was unwell.

- People had health passports. This meant should a person be admitted to hospital important information about their care needs was shared with health staff.

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

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 Act 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 MCA.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- People were supported in line with the principles of the MCA.
- Staff received MCA training and obtained people's consent before providing support.
- People's consent to care and ability to make decisions was recorded within their care plans.
- The manager and registered manager demonstrated a good understanding of the principles of the MCA.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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; Respecting and promoting people's privacy, dignity and independence

- People were complimentary about the caring attitude of staff. One person said, "Staff are kind and caring. They always treat me with respect. They knock on my door and shout out; they don't just enter my room. I feel safe as there is always someone [staff] here all the time."
- People's relatives were positive about the care provided to their family members. Feedback included, "To be honest it's the best place [name] has been in. They go above and beyond. They are wonderful and I'm not just saying that." And, "[Name] seems very happy and settled. [The service] has had a positive impact on their health and wellbeing."
- Importance was placed by staff to encourage people to maintain their independence. One person said, "They help with some tasks but try and get us to do as much as we can for ourselves."
- Staff received equality and diversity training and there were policies in place to help ensure staff provided care which promoted and respected people's rights. The registered manager told us, "We have a zero tolerance on discrimination. We want all our services [supported living schemes] to be an inclusive environment."

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

- People were supported to make decisions about their care and support.
- The manager and registered manager regularly met with people to discuss the support they received. One person said, "[Registered manager and manager] come in and checks how we are all doing." The registered manager told us, "People are involved in their care plans and ongoing review of these. When I am in the homes, I encourage people to have one to one sessions with me to discuss how they would like to be supported. I encourage staff to do this too."
- The service held information on local advocacy services. The registered manager informed us no one was currently using advocacy services. An advocate supports people to express their views and wishes.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The ethos of the service was to provide individualised, person centred care which promoted people's health and wellbeing.
- Care plans were person centred and included information on how they wished to receive their care and support.
- Care plans were reviewed regularly to ensure they continued to meet the needs of people. Staff were notified of any changes in people's care and support needs. This ensured staff had access to current and relevant information.
- People benefitted from having regular care staff to promote continuity of care.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service identified people's information and communication needs by assessing and recording them.
- The registered manager assured us no one would be discriminated from accessing the service and information would be made available in appropriate formats to ensure people's communication needs were met.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to engage in meaningful activities such as volunteering and pursuing their interests and hobbies.
- Staff recognised the importance of preventing social isolation as this could affect people's wellbeing. Due to restrictions in accessing the community during the COVID-19 pandemic, staff looked at ways they could support people. The registered manager said, "Before COVID-19 we would take people to activities and groups in the community, for example MIND. We have always put on activities but during COVID-19 we could see people were getting restless so we looked at the best way we could support them. We introduced cooking evenings, walks out in our 'bubbles', movie nights and gardening. We also supported people to have video chats with their families."

Improving care quality in response to complaints or concerns

- Systems were in place to manage complaints.

- No complaints had been received by the service. People and their relatives told us they were confident any concerns would be taken seriously and acted upon. One person said, "I feel they would listen to any concerns. [Manager] does listen and helps with anything. I can report to her and I'm sure she will act."

End of life care and support

- At the time of our inspection the provider was not supporting anyone with end of life care. The registered manager told us they would support people's end of life wishes and work closely with people; their relatives and relevant healthcare professionals.

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.

This is the first inspection for this newly registered service. This key question has been rated 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; 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

- Both the manager and registered manager were committed to delivering high quality support which promoted a positive culture and person-centred service which was open and inclusive, empowering people with mental illness and substance misuse to lead fulfilling lives and achieve their goals and aspirations. The manager said, "We are passionate about the people we care for. Historically they have had a lot of breakdowns and since being with us they have been well. I have seen care in many ways, and I don't want bad care for people. I have the right team around me."
- With the exception of one person, people and their relatives told us they would recommend the service to others. One relative said, "I would recommend the service to others. We know [name] is lucky, as many people their age would have been another statistic."
- Staff told us morale was good and they worked effectively together as a team.
- The registered manager understood the duty of candour and their duty to be open and honest about any incident which caused or placed people at risk of harm.
- Systems were in place to investigate and feedback on incidents, accidents and complaints.

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

- Staff enjoyed working at the service and were clear on their roles and responsibilities. They felt supported and valued and spoke highly of the manager and registered manager. One member of staff said, "I feel valued and supported. [Manager and registered manager] are good people to work with; they listen to you and if you have any issues they are approachable and so helpful."
- The manager and registered manager completed regular checks and audits on the quality of care provided and took action to make any improvements needed.
- The registered manager was aware of their responsibilities to report notifiable events to CQC.

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

- The manager and registered manager engaged with people, relatives and staff to provide good care which promoted positive outcomes and support. One relative told us, "They are first class, very good, and we are very happy with [name's] care. I cannot fault [manager]. She is on the ball and very honest and helpful and lets us know exactly what is going on."

- Service user and staff surveys had been completed. We noted responses had been positive and the provider had carried out an analysis of the feedback received.
- Staff told us communication was good. They told us they were able to raise any concerns and contribute to how the service was run through supervision and team meetings. The registered manager told us, "Our values are to put people first. If there are any concerns staff can say without fear of recrimination. Staff know reporting any issues at handover is paramount."
- The registered manager was committed to continuous learning and improving care. This included attending various care forums and keeping themselves updated with current guidance. They viewed one to one sessions with people who used the service as pivotal to driving improvements.

Working in partnership with others

- The service worked closely with other health and social care professionals in relation to people's care to ensure people received the care and support that was right for them. One professional told us, "We have had a positive experience with Dayspring Care. As far as I am aware, we have had no issues reported during social care reviews, or in general from professionals or clients."