

Delta Care Ltd

# Delta Care Ltd- Blackpool

## Inspection report

92 Norbreck Road  
Thornton-cleveleys  
FY5 1RP

Tel: 01253335896  
Website: [www.deltacare-ltd.com](http://www.deltacare-ltd.com)

Date of inspection visit:  
20 January 2021  
21 January 2021

Date of publication:  
05 February 2021

## 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

Delta Care Ltd- Blackpool is a domiciliary care service providing personal care to 81 people at the time of the inspection. 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. The service has recently changed address and a notification has been submitted to the commission. This inspection took place at the new premises located at; 24 Fleetwood Road North, Thornton, FY5 4AD.

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

People and their relatives told us that the service was safe. Medicines were well managed, and staff told us they were confident giving people medicines. Staff were aware of how to identify and report safeguarding concerns. Staff followed infection control procedures, one person told us, "They always wear personal protective equipment [PPE] and have hand sanitiser hanging round their neck which they are always using." Staff were able to tell us about the risks to people and knew how support people to minimise the risks.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible in their best interest; the policies and systems in the service supported this practice. People were involved in their care planning. One person told us, "I am completely involved in my care plan. I make all the decisions." Staff told us that they received training and felt supported in their role. One staff member said, "I get amazing support from management I couldn't ask for better, we are treated as individuals and get support with all aspects of life not just work."

The service was caring. People told us that the staff treated them with kindness and respect. One person said, "My relative's always laughing and joking with them [staff]. They're like friends." Staff were aware of how to protect people's privacy and dignity and people told us that the staff did this well. People felt supported to make decisions about their daily lives.

People told us they knew how to complain and there was a policy and procedure in place. We saw that this was followed. One person told us, "I am quick to complain if there's something that's affecting my family but with Delta Care we just don't have that problem." Staff had received training in end of life care. Staff supported people to go out shopping and attend appointments when they needed to. Staff were aware of people's communication needs and how best to support them. People told us the service is flexible and responsive to their needs. One person said, "When I called the office to ask for an extra call ... it was arranged within twenty minutes."

People told us the service was well managed. One professional told us, "They are one of the most uplifting providers we have the pleasure of speaking with... they have been a shining example of positivity through this crisis." Staff told us they received staff newsletters and information was shared with them. There was a positive staff culture. We found the management team receptive to feedback and keen to improve the

service. The registered manager worked with us in a positive manner and provided all the information we requested.

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

This service was registered with us on 07/05/2019 and this is the first inspection.

#### Why we inspected

The inspection was prompted in part due to concerns received about staff training, medicines and the support people were receiving from the service. 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 this concern. Please see the safe, effective and caring 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 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 ●

# Delta Care Ltd- Blackpool

## 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 carried out by two inspectors 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

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

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. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 20.01.2021 and ended on 21.01.2021. We visited the office location on 21.01.2021.

#### What we did before the inspection

We reviewed information we had received about the service since it was registered. We sought feedback from the local authority. 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 three people who used the service and seven relatives about their experience of the care provided. We spoke with eight members of staff including the registered manager. We reviewed a range of records. This included five people's care records and multiple medication records. We looked at three 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 spoke with one professional who regularly worked 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 procedures to minimise the potential risk of abuse or unsafe care. Staff had received safeguarding training and were able to demonstrate their knowledge. People told us they felt safe with the staff.
- Management and staff understood how to safeguard people and were clear about when to report incidents and safeguarding concerns to other agencies. Staff told us they would not hesitate to raise concerns if they witnessed abuse or poor practice.

### Assessing risk, safety monitoring and management

- The registered manager and staff assessed and managed any risks to people's health, safety and wellbeing. This included assessments of specific risks such as the risk of falling and nutritional needs. Staff were provided with guidance on how to keep people safe. However, we found inconsistencies in two people's care plans. We discussed this with the registered manager who agreed with our findings. In response, the registered manager acted to review the care plans.
- Staff explained they were aware of the different risks people were vulnerable to which reduced the risk of harm.

### Staffing and recruitment

- Recruitment was safe. Staff recruitment systems and records showed pre-employment checks were completed to help protect people from those who may not be suitable to work with them.
- Comments from people about staffing were positive, people felt staff had adequate time to spend on visits. People did not feel rushed and were usually asked if they needed anything else before the staff left.

### Using medicines safely

- Medicines were managed safely. Staff were suitably trained to administer medicines and checks on their practice had been carried out.
- People spoken with said their medicines were well managed. Management completed checks and identified and acted on areas for improvements.

### Preventing and controlling infection

- The provider had arrangements to ensure people were protected by the prevention and control of infection.
- Staff had access to PPE, and they had received training on infection control.

### Learning lessons when things go wrong

- The provider promoted an open and transparent culture in relation to accidents, incidents and near misses. Managers and staff were aware of and fulfilled their responsibility to report and record, accidents and incidents. Where lessons had been learned these were shared throughout the 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. 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 received safe and effective care which met their needs. The registered manager completed initial assessments and devised care plans. Staff used these to guide them on how best to support people.
- The provider had policies and procedures for staff to follow which reflected relevant local and national legislation, guidance and CQC regulations.
- Peoples rights were protected. Policies and the initial care assessment supported the principles of equality and diversity.

Staff support: induction, training, skills and experience

- Staff had the skills and knowledge to carry out their role effectively. New staff were given an induction programme to ensure they could carry out their role safely and competently. One staff member told us, "Induction was great, I received training in key areas and completed shadow shifts. I felt confident and was continued to be supported."
- People spoke positively about the care staff who supported them and felt staff had the skills to meet their needs.
- Staff told us they were provided with opportunities to discuss their responsibilities, concerns and to develop their role. They were complimentary about the support they received from the registered manager.

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

- Peoples needs for nutrition and fluids had been considered. Records documented peoples likes and dislikes and identified any associated risks with eating and drinking.
- People we spoke with said they were given choices on what meals and drinks they wanted.

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

- The registered manager and staff provided appropriate support to meet people's healthcare needs. People's physical and mental healthcare needs were documented which helped staff recognise any signs of deteriorating health. One relative told us, "Staff are vigilant in contacting me if there's anything amiss."
- Staff worked closely with social and healthcare professionals as well as other organisations to ensure people received a coordinated service.

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.

- Staff recorded people's capacity to make decisions in the care plans. People were asked to consent to their care.
- We spoke to staff about their understanding of the MCA and were assured by their knowledge.
- Staff we spoke with were passionate about promoting independence, choice and control for their clients.

# 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

- People were treated with respect, compassion and kindness. People were complimentary about the attitude and kindness of staff. One person told us, "The staff are lovely and caring with my relative." And, "The staff are 100% on the ball.... my relative looks forward to them coming."
- Staff and people using the service had developed good relationships. Staff knew about people's preferences and how best to support them. One person told us, "Staff come in and they know straight away what to do. They just get on with it, they are very good." Another said, "The staff and I have a good laugh and that's what I need".

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

- The service supported people to make choices in their daily lives. Staff said they had time to talk with and listen to people.
- Staff encouraged people to make decisions about their day to day routines and their care needs, in line with their personal preferences. People could express their views as part of daily conversations, monthly review meetings and customer surveys.

Respecting and promoting people's privacy, dignity and independence

- The registered manager and staff respected and promoted people's privacy, dignity and independence.
- Staff encouraged people to maintain their independence whenever possible. People told us how they were encouraged to be independent in daily living activities.
- People's information was stored and held in line with the provider's confidentiality policy and with recent changes in government regulations.

# 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; 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 received personalised care, which met their current and changing needs. We saw care records were written in a person-centred way. Care records were regularly reviewed.
- The registered manager and staff recognised the importance of supporting people on an individual basis. They understood the importance of promoting equality and diversity and respecting individual differences.
- People were supported to maintain contact with their friends and family. Information about people's hobbies and interests was included in their care plan.

### 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 registered manager and staff understood about the AIS. Staff told us how they communicated and engaged with people, using ways best suited to their individual needs and preferences.

### Improving care quality in response to complaints or concerns

- The provider had processes to respond to people's complaints or concerns. A complaints policy was available and information about how to make a complaint was included in the service user guide. People told us they felt able to raise any concerns with staff or management.
- People were encouraged to discuss any concerns during meetings and during day to day discussions.
- The registered manager confirmed and we saw that any concerns or complaints were taken seriously, explored and responded to.

### End of life care and support

- The provider had processes to provide people with effective end of life care. Staff received end of life care training as part of their induction. The registered manager told us staff worked closely with GPs, district nurses and relatives to ensure people's end of life care needs were met and their wishes respected.

# 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.

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

- Systems were in place which continuously assessed and monitored the quality of the service. The audits completed had highlighted areas for improvement and action plans had been devised. Staff meetings and supervision sessions were used to ensure continuous learning and improvements took place.
- The registered manager responded immediately during and after the inspection. They confirmed the documentation where shortfalls were identified during the inspection had been reviewed and updated where required.
- There was a clear vision and plan to deliver high quality care and support at the service. Staff were aware and involved in this vision and the values shared.
- Staff newsletters and training sessions were used to ensure continuous learning and improvements took place.

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

- There was a positive culture at the service which focussed on providing people with high standards of care. Management and staff knew people well and empowered people to make decisions about their care and support. Staff told us they felt supported and valued by the management team.
- Management had the skills and knowledge to lead the service effectively, they were well respected by the staff team. The leadership was visible and inspired the staff team to provide a quality service.

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 and provider understood their duty of candour responsibilities. Good relationships had been developed between management, staff and people using the service and their family members.
- The registered manager had been open with people when things went wrong. Any incidents were discussed with staff during meetings, when appropriate or in one to one support sessions.

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

- People felt they were listened to. People were encouraged to be involved in the development of the service and feedback was sought from people who used the service.
- The registered manager had an 'open door' policy, so people could approach them directly to discuss any

concerns openly and in confidence.

#### Working in partnership with others

- Records and discussion demonstrated the service worked in partnership with a variety of health and social care professionals to ensure people received the support they needed. These included social workers, GP's and community nurses.