

Doves Care & Support Limited

New Doves Care

Inspection report

Unit 30A
Coppice Trading Estate
Kidderminster
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Tel: 07484358722

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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

New Doves Care is a domiciliary care agency that provides support for children, people living with dementia, learning disabilities and/ or autism. At the time of the inspection there were 14 people who were being supported with the regulated activity.

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 been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People were cared for by staff who knew how to keep them safe and protect them from avoidable harm. Knowledgeable, skilled staff were available to meet people's needs. People's risks were assessed and plans in place to guide staff. Safe systems were in place for the management of medicines when people needed support with this. Staff understood and followed infection control and prevention procedures. Systems were in place to investigate incidents and accidents to ensure actions were taken to prevent recurrence.

People's needs were assessed, and care was planned to meet legislation and good practice guidance. Care was delivered by staff who were trained and knowledgeable about people's needs and wishes. 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 were being implemented to support this practice.

People were cared for by staff and the management team who provided quality care and supported people well. People were supported by staff who were kind and considerate towards them, who people considered friends. People and their relatives felt involved and supported in decision making. People's privacy was respected, and their dignity maintained.

People and their relatives were positive about the service and the care provided. Staff had the information they needed to provide personalised support. Support provided was adaptable where possible to support people's individual needs. People's concerns were listened to and changes made to improve the service. When people needed support at the end of their life the service had skilled staff and systems in place to provide quality support.

The management team were open, approachable and it was important for them to provide person centred care. People knew the management team had good communication links. People were supported by staff who were regularly monitored to ensure the quality of the care provided. The management team and staff established good relationships with other professionals.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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 10/10/2018 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 ●

New Doves Care

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 team consisted of one inspector

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 it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

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 and professionals who work with the service. This information helps support our inspections. 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 and three relatives about their experience of the care provided. We spoke with nine members of staff including the registered manager, senior care workers, support workers and the care co-ordinator.

We reviewed a range of records. This included four people's care records. We looked at two staff files in relation to recruitment. 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 two professionals who regularly work 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

- Staff understood how to protect people from abuse. They were trained and understood who they needed to report concerns to and were confident appropriate action would be taken.
- The registered manager met their responsibilities to report any concerns through their robust procedures.

Assessing risk, safety monitoring and management

- People said they felt safe and relatives were confident staff were knowledgeable about supporting their family member safely. One relative told us, "They [staff] are really good at managing risk, I feel very confident with them."
- Risk assessments were up to date and gave clear guidance to staff and were reviewed when required. One relative explained staff knew their family members risks from the start. They also said, any new staff shadowed experienced staff so they knew exactly how to keep their family member safe.
- Staff demonstrated a good understanding of people's risks and knew how to mitigate them. For example, one member of staff described how a person needed specific support when showering. Staff understood the person's risks and the information was recorded in the person's care documents.

Staffing and recruitment

- People and their relatives told us they had regular staff as much as possible, and they were confident with their skills and abilities. Relatives explained how the management team matched staff to their relative and checked the relationship worked well.
- One person explained how they knew if there were any changes in who was visiting them, and this reassured them.
- The registered manager explained they would not provide a new service to new people without having staff to meet their needs. Staff we spoke with had completed a thorough induction to enable them to meet people's needs.
- The care co-ordinator monitored the system in place for visits to ensure there were not any missed visits.
- Staff we spoke with told us they had provided references and there were checks in place to ensure they were suitable to be employed at the service. We saw this practice was reflected in staff files.

Using medicines safely

- At the time of the inspection no one receiving a service was receiving support with medicines.
- Staff were trained to administer medicines and as part of the spot check system, when people were supported with medicines this was checked regularly.

Preventing and controlling infection

- People told us they were confident staff always followed safe practice.
- Staff completed training and were knowledgeable about the requirements. Measures were in place to control and prevent the spread of infection, such as protective equipment available for staff.

Learning lessons when things go wrong

- When there were accidents and incidents these were reviewed by the management team to look at trends and any learning from the incident. There were no recent examples of accidents and incidents, however daily logs were monitored for any concerns.
- Staff knew how to report accidents and incidents and told us they were confident these would be looked into and addressed.

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

- The management team assessed, and documented people's needs and preferences in relation to their support and planned their care from this information.
- We saw information on best practice guidance was available for staff.

Staff support: induction, training, skills and experience

- Staff told us they had completed induction training when they first started the role. They said they met people they were supporting before they supported them with experienced staff, who shared their best practice knowledge. They had the information they needed to support people well. They also told us the senior team completed competency checks so they were confident with their role.
- We saw ongoing training updates were arranged for staff, and staff completed the care certificate. Staff said they were encouraged to further develop their knowledge and skills through vocational training. The registered manager was sourcing service additional training to support people with complex needs in January.

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

- Support offered to people varied dependant on their individual needs. People were encouraged to be as independent as possible.
- Staff were knowledgeable about how to meet people's nutritional needs. When needed staff would record nutrition intake and made referrals appropriately.

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

- People and their families explained they were confident staff would support them to access healthcare services if they needed support.
- Staff were aware when support was needed to attend a health appointment and worked with the person and their family to meet their needs. Relatives told us staff would support them for GP appointments if their family member was unwell or contact community nurses.
- Staff understood people's health needs and were knowledgeable about people's health conditions.
- We spoke with social workers who explained they worked well with the team and had a good relationship with the management team. The professionals told us staff listened to them and acted on their direction. Where issues were identified the management, team took steps to resolve them and work with the social worker, people and their families.

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 told us staff asked for their consent before they supported them. Staff respected their wishes and listened to them.
- The registered manager was updating her skills and putting systems in place to ensure people were supported with decisions lawfully.
- Staff had completed training, however there were no people receiving support who may lack capacity at the time of the inspection. The registered manager would ensure staff understood any new processes she put in place.

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 said all the staff were kind and caring. One person explained how staff supporting them increased their confidence which helped them achieve what they would usually struggle with. They said staff really understood their needs.
- Relatives gave positive feedback about the staff and management team support. One relative said about staff, "They are all great and really get on well with [person], they make such a difference. "
- Staff demonstrated consideration and sensitivity about issues related to equality, diversity and human rights when discussing people who they supported. There were examples where staff worked alongside families to support people to access the community and be as independent as possible. This improved people's outcomes and well-being.
- Professionals we spoke with told us staff communicated well and were passionate about ensuring people were well supported.

Respecting and promoting people's privacy, dignity and independence

- People told us staff respected their privacy and dignity and supported them to be as independent as possible. One person explained how staff always knocked and this was important to them and their family.
- Relatives said staff supported their family member to be independent as possible. One relative said they worked with staff and their family member was achieving greater independence now which they had not thought possible.
- All the staff we spoke with were passionate about the people they supported and spoke of respecting their wishes and constantly encouraging people to live full lives.

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

- People made the decisions about their day to day support. Relatives confirmed staff really listened to their family member's ideas and worked with people to express their views.
- People and their families were regularly asked for feedback to ensure they were happy with the support staff provided. People and their families were contacted by the management team to discuss their support regularly to ensure all opportunities for improvement were made.
- Relatives we spoke with told us communication was excellent, they felt involved in how their family member was supported and were kept included and updated by staff and the management team.

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

- Information had been gathered from people and their families to build a detailed picture about each person's support needs, preferences and history. The senior care staff explained how after people were assessed they spent time with them to find out all the extra details which they then used to match care staff to people. These extra details were shared with staff as they spent time with the senior care staff and the person to ensure they understood how to meet their needs.
- Records contained information for staff on how best to support people with all aspects of their life. Promoting people's independence was risk assessed to provide appropriate support. They also included detailed information about their health needs and the care people required to manage their long-term health conditions.
- Staff had an excellent knowledge about people they supported. They got to know them over time and the shared information from experienced staff.
- People and their families told us people's support was very flexible and adaptable. For example, one relative explained how sometimes they made changes at short notice and these were always accommodated. People and relatives said support arrangements were regularly reviewed to ensure people were happy with them.

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.

- Staff explained how they communicated with people to understand their wishes. When people were less able to communicate verbally, staff found different ways to ensure they understood their needs. For example, using electronic equipment to support communication needs.
- The management team were aware of the accessible communication standards and ensured people had access to their information. For example, they had information in different formats when it was needed.

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

- Some people had access to the community and the choice of events and interests as part of their agreed package of care. One relative said staff were always looking for new things for their family member to do.
- Relatives said staff supported their family member to stay in touch with friends to keep them connected and to reduce any isolation.

Improving care quality in response to complaints or concerns

- People and their relatives knew how to raise concerns if they needed to. One person said they had, "Absolutely no complaints," and were confident if they did they could speak to the management team. Relatives told us when they made suggestions these were actioned by the management team, and they felt listened to.
- The management team had a complaint policy and procedures to review any complaints to ensure they acted on concerns raised appropriately.

End of life care and support

- Staff told us they supported people with end of life care when this was needed. They were knowledgeable about how to respect people's needs and wishes.
- The management team explained they had worked alongside other agencies to support people who chose to remain in their own homes at the end of their life.

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

- People and relatives said the management team knew them well and they were approachable. One person said they knew the registered manager and they regularly checked they were happy with everything.
- People and relatives said communication with staff and the management team was good. They explained staff and the management team used new technology to ensure communication was open and supportive.
- All the staff we spoke with said there was an open and positive culture, led by the management team. One staff member told us they received regular support from the registered manager which was adapted to meet their needs depending on their well-being. All the staff said they could share any concerns and the management team would support them.
- The management team were open and understood their responsibility to meet the duty of candour. When improvements were needed these were investigated and shared with people and their families, and staff.

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

- People and their relatives gave positive feedback about the care they received. They all said they were very happy with the service.
- The management team were implementing systems as their service grew to ensure they kept an overview of the quality of care provided.
- The management team used technology to improve the quality of the care provided. They had systems in place to ensure staff had access to the information they needed.
- Staff were clear about their responsibilities and the leadership structure. The management team had systems in place to ensure they followed through on any concerns.
- The management team understood their responsibilities for reporting to the Care Quality Commission [CQC] and the regulatory requirements. Risks were identified and escalated where necessary.
- The management team monitored staff practice to ensure they provided quality care and followed best practice guidance.

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

- People and relatives told us the management team listened to them and were very flexible in their approach and would adapt the service to meet their needs.

- The management team completed spot checks and reviews to ensure staff and the people they supported had good relationships and people were happy with their support.

Continuous learning and improving care

- The management team were continuing to identify service specific training to ensure staff had the skills to support people.
- The management team regularly audited all aspects of their care delivery to constantly keep the support provided under review.
- There were new systems in place to review accidents and incidents, and ensure learning was used to inform future plans.

Working in partnership with others

- The management team was developing links with the community to support them to provide quality care. For example, one member of staff explained how they supported one person to access local events which linked them into the community.
- Two social workers told us staff and the management team had good relationships with them. This supported positive outcomes for people such as helping people become more independent and enriched their lives.