

Direct Care Support (DCS) Limited

Direct Care Support Head Office

Inspection report

1A John Street Great Ayton Middlesbrough North Yorkshire TS9 6DB

Tel: 01642985806

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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

Direct Care Support Head Office provides personal care to people living in their own home. 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. At the time of the inspection the service was supporting nine people and eight were receiving personal care.

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

We received positive feedback from people who told us they were happy with the support they received from Direct Care Support Head Office. People received person-centred care and staff knew people well.

People received person centred care and had care plans in place to reflect their preferences and needs. People told us staff were respectful and kind.

Peoples health and well-being needs were supported from the staff team who with the registered manager worked in partnership with other healthcare professionals. There were systems in place for communicating with people, their relatives and staff to ensure they were fully involved.

Medicines were managed well, safely administered and recorded accurately. Individualised risk assessments were in place. Staff were confident they would raise concerns to safeguard people. Robust recruitment and selection procedures ensured suitable staff were employed.

All essential visitors to the office had to wear appropriate personal protective equipment (PPE). In addition, complete NHS Track and Trace information, and provide evidence of a negative Covid-19 test. Staff completed online training which included putting on and taking off PPE, hand hygiene and other Covid-19 related training. Additional competency checks and spot checks were carried out by the registered manager with all staff regarding safe use of PPE.

People were supported in a personalised way by staff lead by a family friendly ethos from the registered managers approach.

Rating at last inspection

This service was registered with CQC on 7 September 2020 and this is the first inspection.

Why we inspected

This was a planned first rating inspection. We looked at infection prevention and control measures under the Safe key question. We look at this in all inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks

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effectively.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good •
The service was safe.	
Details are in the safe findings below.	
Is the service effective?	Good •
The service was effective.	
Details are in the effective findings below.	
Is the service caring?	Good •
The service was caring.	
Details are in the caring findings below.	
Is the service responsive?	Good •
The service was responsive.	
Details are in the responsive findings below.	
Is the service well-led?	Good •
The service was well led.	
Details are in the well led findings below.	



Direct Care Support Head Office

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 one inspector 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 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. We sought feedback from the local authority and professionals who work with the service.

The provider was 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, five relatives, the registered manager, and three support staff.

We reviewed a range of records. These included three people's care records, a variety of records relating to the management of the service, including audits and procedures.

After the inspection

We continued to seek clarification from the provider to corroborate evidence found. We looked at audits, care plans, reports and policies.



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.

Preventing and controlling infection

- People were protected from the risk of infection
- People were supported by staff who were trained to use PPE appropriately and safely.
- The provider was making sure infection outbreaks could be effectively prevented or managed by following the current government guidance.

Assessing risk, safety monitoring and management

- People told us they felt safe, one person told us, "I feel very safe. The carers are very attentive. They make sure I'm holding on when I get up, when I'm coming down the stairs, they walk with me, they make sure I feel secure."
- People had both general and personalised risk assessments which were regularly reviewed. Where risks were identified, support plans showed ways in which staff could reduce these risks.
- Fire safety practices were in place along with regular checks to equipment used by staff.

Using medicines safely

- Medicine administration records were clear and completed fully.
- People received their medicines as prescribed, at the right time.
- People were also supported to manage their own medicines safely where appropriate.

Systems and processes to safeguard people from the risk of abuse

- Staff had received safeguarding training and were able to appropriately raise any concerns.
- No safeguarding concerns had been raised however; procedures were in place for staff to follow in the event of any suspected abuse.

Staffing and recruitment

- There were enough staff to meet people's individual needs and maintain their safety.
- Staff were recruited safely, using robust checking methods to ensure only suitable people were employed.

Learning lessons when things go wrong

• The registered manager ensured that procedures were in place to record, analyse and take appropriate action regarding any accidents and incidents.



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.

Staff support: induction, training, skills and experience

• People were supported by staff who were trained to meet their needs.

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

• The staff were aware of people's dietary needs and supported people appropriately.

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

- The service worked in partnership with external professionals, such as social workers, and GPs to support and maintain people's long-term health.
- People had personalised care plans covering their healthcare needs. These shared important information with healthcare professionals.

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

• Any changes to people's needs were reviewed with them and their relatives and this was reflected in their care plans.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

• No one who used the service had a court of protection application in place. However, staff were trained in this area and where people gave consent to receive personal care, this was recorded.



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.

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

• Staff were trained in dignity and respect. Staff always treated people with kindness and respect. People told us, "The carers are very kind and respectful. I feel they respect my home too."

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

- People were supported to share their views on the service via a questionnaire and regular phone calls.
- People were supported to have their say and had access to independent advocates where required to promote their rights.
- Staff spent time listening and talking to people. One person told us, "The carers are an absolute godsend. They're aware of my condition and are very patient, very caring and very knowledgeable. "One relative told us, "The carers are respectful. It's the way they speak to us. I always feel they care about. Everything is listened to and they will suggest things.'

Respecting and promoting people's privacy, dignity and independence

- People were supported to maintain their independence while promoting dignity and privacy. One person told us, "The carers help give me my independence, I couldn't cope without them now. They help me shower and put the bin out. These are extras I haven't even asked for. I definitely need their help.'
- Staff engaged with people in a dignified way, this was reflected throughout the comments we received about the staff.



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

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

- Support plans were in place for people who used the service. These covered what support was required to meet people's needs, they were personalised and reviewed regularly.
- The support people received was individual to their needs and was delivered in a person-centred way. Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities socially and culturally relevant to them
- The service didn't support people with social activities but were respectful of people's social and cultural needs. One relative told us, "The service has had a massive impact on my relatives with the social interaction they gain from the carers. It's completely turned things around for 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.

• Communication needs were met individually and where appropriate information could be adapted to suit people's preferences and needs.

Improving care quality in response to complaints or concerns.

- A complaints procedure was in place that was followed by the registered manager and staff.
- People were supported to raise any issues. Where issues had been raised these were addressed and with appropriate follow up where required.



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.

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

- The registered manager encouraged people and staff to be open with each other and created a culture of acceptance.
- The culture at Direct Care Support Head Office was a family ethos and to provide person centred support.

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

- The provider had contingency plans for people to ensure minimal disruption to care in case of an emergency, and in response to the COVID-19 pandemic.
- Policies, procedures and audits were current and in line with best practice.
- The provider knew when to send notifications to us relating to significant events occurring within the service.

Continuous learning and improving care

- People who used the service interacted positively with the registered manager and told us how approachable they were, one person told us, "The manager is fantastic, she really cares. I feel very listened to. I see the manager so regularly, I feel she does know about any changes in the service, including any new carers for me."
- The registered manager took on board opinions and views of the people who used the service and their relatives to make improvements.
- Staff said they felt supported by the registered manager.

Working in partnership with others

• People were supported by a range of healthcare professionals and the registered manager and staff had forged good working relationships.

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

- There was clear leadership and regular audits were carried out by the registered manager to understand the quality and safety of the service.
- Policies and procedures were current and in line with best practice.
- The registered manager was open regarding their transparency in dealing with incidents and complaints and taking responsibility for actions.

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

- The registered manager held meetings for the staff team to discuss relevant information.
- Staff could approach the registered manager for support at any time. One staff member told us, "We are a small team we speak on the phone every day with each other and the manager."