

DCL-PRO Services Ltd

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Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

DCL-Pro Services provides domiciliary care services for adults with a wide range of needs. The service offers support to people who require help with day to day routines, including personal care, meal preparation, shopping, housework and supporting people out into the community. At the time of our inspection there were 7 people using the service.

People's experience of the service and what we found:

There were systems in place to keep people safe. Staff safeguarded people from abuse. Risks to people's health, safety and well-being were managed. There were enough staff to meet people's needs and safe recruitment processes were followed.

The provider had effective systems to review incidents, check appropriate action had been taken and identify learning. The provider and staff protected people from the risk or spread of infection.

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 supported this practice.

The service was well managed. The provider, managers and staff promoted a positive culture in the service. People and relatives were complimentary about staff and the care people received. The provider had an effective quality assurance process in place which included regular audits and spot checks.

People, relatives and staff were regularly consulted about the quality of the service through regular communication, meetings and reviews.

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

Rating at last inspection and update

The last rating for this service was Requires Improvement (published 10 April 2021) and there were breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

When we last inspected DCL-Pro Services on 22 February 2021 breaches of legal requirements were found. This inspection was undertaken to check whether they were now meeting the legal requirements.

We undertook a focused inspection to review the key questions of safe and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

Follow Up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

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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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 1 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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was announced. We gave the service 24 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 used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

During the inspection

During the inspection we spoke with 2 people who used the service and 2 relatives about their experience of the care provided. We also spoke with the registered manager, operational manager, office manager, office co-ordinator and 3 care workers. We reviewed a range of records which included the care plans for 3 people. We looked at care records for 3 people and 3 staff files in relation to recruitment, training and support, a variety of records relating to the management of the service, including audits, policies and procedures were reviewed.

Is the service safe?

Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection the provider did not always ensure the effective management of risks to people's safety and well-being. This was a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- People were safe because their known risks were assessed and mitigated. Risks in relation to falls, choking, diet and nutrition, health conditions and moving and handling were assessed and action was taken to reduce them.
- People had plans and guidance in place to ensure staff knew about risks in relation to their care and supported them safely and consistently.
- Risk assessments were reviewed periodically and when people's needs had changed. A person said, "Staff are briefed on every little thing, so they are prepared to support me safely."

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- There were systems to help safeguard people from the risk of abuse. These included procedures which were shared with staff. Care workers told us they understood potential signs of abuse and would feel confident to report these to the registered manager or in fact any office managers.
- People using the service told us they felt safe. There was information about safeguarding available in the paperwork the provider gave to each person to keep in their home.

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff and operated safe recruitment processes.
- The provider followed robust procedures when recruiting new staff. This included reviewing applications, interviewing applicants, and confirming they were of good character. This was done by carrying out criminal records checks and checking employment histories. This meant staff were safe and suitable to provide care and support.
- New staff received an induction to ensure they had the skills, knowledge, competence, and confidence to support people.

- People told us staff usually arrived on time and if they were delayed, they would receive a call letting them know. They also confirmed that staff would stay for the agreed time and sometimes longer if required. A person told us, "The level of continuity and care is very good I have had the same carer for years and she is excellent."

Using medicines safely

- People were supported to receive their medicines safely.
- The provider had an administration of medicines policy in place and staff had completed training on handling medicines and their competency was assessed.
- At the time of the inspection staff were not administering medicines but they were assisting people to access their medicines as they found it difficult to remove them from the packages. The people they supported were either able to manage their own medicines or a family member assisted with them.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- There were appropriate procedures in place for infection prevention and control. Staff had access to an adequate supply of personal protective equipment (PPE) including gloves, masks and aprons.
- The registered manager confirmed all staff had completed infection control training and this was supported by the training records we saw.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- The provider had a clear process for the reporting and investigating of incidents and accidents.
- The provider kept a record of accidents and incidents and used these to learn lessons so improvements to the service could be made. These were reviewed by the registered manager to ensure the correct action had been taken and any lessons could be learnt.
- Any lessons learnt were shared at staff meetings to ensure staff were aware of any changes.

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.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care

At our last inspection the provider did not always have robust systems to assess, monitor and improve the quality and safety of the service. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The provider had created a learning culture at the service which improved the care people received.
- The provider operated effective systems to monitor and improve the quality of the service.
- The registered managers completed regular audits across the service to monitor and improve the care people received.
- Following the audit completion, the registered manager implemented a service improvement plan which included any actions identified from their auditing with required updates and completion timescales.

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

- There was a positive and open culture at the service and the provider had systems to provide person-centred care that achieved good outcomes for people.
- Staff shared a passionate approach to supporting people. People and relatives were complimentary of the staff group. A relative told us, " The staff are very good and [relative] looks forward to them coming."
- Staff confirmed the registered manager and other managers who supported them were approachable. The registered manager had identified where staff support was required to improve their wellbeing.
- The response from a recent feedback questionnaire led to a person being a part of the handover meeting for the teams supporting them.

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 provider understood their responsibilities under the duty of candour.
- The provider displayed their last inspection rating as required.
- The registered manager had met the duty of candour and was open and honest with people and their families.

- The provider is legally required to notify us when certain incidents occur. The registered manager understood how and when to notify us and sent notifications appropriately.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- Staff and managers were clear about their roles
- The registered manager maintained a clear audit schedule and evidenced actions taken to develop or change the service to meet people's needs.
- Managers ensured people were supported by staff who had been trained and appropriately recruited.
- Quality assurance work had taken place in relation to care plans and risk assessments. People confirmed they were involved in their care and how this was provided. This meant that people's support needs were updated regularly and, areas for further development were identified.

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

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.
- Staff told us managers were easy to contact and on-call was available 24 hours per day. Staff received 1-1 support and team meetings were arranged on a regular basis and when needed.
- Surveys were completed with staff, and people using the service. The provider then used this information to improve where required.

Working in partnership with others

- The provider worked in partnership with others.
- The provider worked in partnership with other health and social care professionals to monitor and meet people's needs. They liaised with medical professionals, advocates and social workers when needed.
- The registered manager had access to online forums and networks to keep up to date with guidance.