

Dignified Homecare Limited

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## Inspection report

61 Coleridge Road  
Romford  
Essex  
RM3 7BD

Date of inspection visit:  
05 September 2018

Date of publication:  
10 October 2018

### 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

This inspection took place on 05 September 2018 and was announced. At our last inspection in January 2016, we found the provider was meeting the regulations we inspected and the service was rated "Good". At this inspection, we found that the service continued to be rated "Good".

Dignified Homecare Limited provides care and support to people living in their own home. Not everyone using Dignified Homecare Limited receives regulated activity; the CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided. At the time of this inspection there were 20 people using the service.

People were protected against the risks of abuse as staff were clear of their responsibilities to protect them from harm. Risks associated with people's support were assessed and recorded in their care plans to keep them safe.

Systems were in place to make sure people received their medicines safely and for the monitoring and prevention of infection.

Staff had the knowledge and skills to care for people effectively and responded promptly to their needs. Staffing levels were sufficient to meet people's needs and recruitment processes were safe.

An initial assessment of people's needs was carried out before they started using the service. People received care and support in accordance with their preferences, interests and diverse needs. They had access to health and social care professionals when required. Referrals were made to health care professionals for additional support or guidance if people's health changed. Staff were knowledgeable about people they supported.

People's choices were respected and staff understood the requirements of the Mental Capacity Act 2005. People were treated with compassion by staff and their privacy and dignity were maintained. Staff supported people to maintain their independence where possible.

There was a system in place to receive and handle complaints or concerns raised. People and relatives had no complaints about the service but knew who to speak to if they were unhappy.

People and their relatives felt the service was well run and they could discuss any issues with the registered manager. There were effective systems in place to seek the views of people, relatives, staff and other professional about the running of the service.

There was an open culture within the service, which was focussed on people. Staff were clear about their roles and responsibilities and had access to policies and procedures to inform and guide them. They had

regular contact with the registered manager to discuss any issues or concerns they might have relating to people's care and support.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

<b>Is the service safe?</b> The service remains good.	<b>Good</b> ●
<b>Is the service effective?</b> The service remains good.	<b>Good</b> ●
<b>Is the service caring?</b> The service remains good.	<b>Good</b> ●
<b>Is the service responsive?</b> The service remains good.	<b>Good</b> ●
<b>Is the service well-led?</b> The service remains good.	<b>Good</b> ●

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## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 05 September 2018 and was announced. The provider was given 48 hours' notice because we needed to be sure that members of the management team were available to assist us with the inspection. It was carried out by one inspector.

Before our inspection we reviewed all the information we had about the service, including notifications sent to us informing us of events that occurred at the service. We also received a Provider Information Return (PIR) from the service. A PIR is a form that asks the provider to give some key information about the service, what it does well and any improvements they plan to make.

During our inspection we spoke with the provider and the registered manager. We reviewed three people's personal care records, three staff records, medicine records, staff duty rotas and other records relating to the management of the service such as meeting minutes, health and safety records, and training records.

After the inspection we contacted two people who used the service, two relatives and two members of staff to obtain their views of the service.

## Is the service safe?

### Our findings

People told us they felt safe when staff came to see them. One person said, "Oh yes, I do feel safe with the carers."

Staff had received training about how to recognise abuse and were aware of their responsibilities to report any concerns they might have. The registered manager, provider and staff were familiar with the process to follow if any abuse was suspected.

We saw risk assessments had been undertaken and there was guidance for staff on what actions to take in relation to manage these risks. Staff had a good knowledge and understanding of each person's risk. The registered manager also assessed the risks around the environment where people lived to ensure it was safe for them as well for staff who visit them.

The provider kept a record of all accidents and incidents involving people using the service and/or staff. Those were reviewed by the management team to identify any trends and actions taken to reduce the risk of similar events happening again.

Staff had been recruited safely. We saw the provider carried out checks such as staff's previous employment history, proof of identity, written references, criminal records before new staff started working for the service.

People told us they never had any missed visits and felt the service employed enough staff to support them. One person said, "[Carers] come regularly." We saw people were visited by the same staff or group of staff and this helped with consistency in the care and support they received.

There were appropriate arrangements in place to ensure that people's medicines were managed safely. Staff helped people to take their medicines as prescribed by their GPs. There was clear guidance for staff to follow where people needed assistance to take their medicines.

Staff had received training in infection control and were aware of their responsibilities in this area. Personal protective equipment such as aprons and gloves were made available to staff. This helped to prevent the spread of infection and ensured people as well as staff were safe.

## Is the service effective?

### Our findings

People felt the staff knew what they were doing and had the skills to provide the care and support. They were happy with how staff supported them. One person told us, "The staff know what they are doing." A relative said, "The staff are very competent."

We saw that an initial assessment of people's needs was carried out before they started using the service. The assessment process was comprehensive and done in a holistic way. Information was gathered from relatives and from the commissioning team to ensure the service had all the relevant details on what the person's needs were and how to meet them.

People were supported by staff that had received appropriate training and support to do their jobs and meet people's needs. There was a training programme in place for all staff. Records showed that staff had received training in a number of key areas relevant to their roles. Staff told us the training they had received was very informative and helped them to meet the needs of people who used the service.

We saw new staff received an induction when they started working at the service. This included training and 'shadowing' a more experienced member of staff. One member of staff said, "The induction I had was very good." Staff felt supported by the registered manager and had regular meetings with them to discuss their development and any concerns they may have. We noted staff received an annual appraisal. This is a meeting in which the staff discusses their progress, aims, and needs at work with the registered manager.

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. One person told us, "The carers always check with me before they do anything." Staff explained how they sought people's consent before care and support was delivered.

Where people required support with their meal preparation, they told us they were happy with how staff prepared their meals. Staff knew what people's dietary needs were, for example what people liked to eat.

Staff monitored people's health and welfare and made referrals to health care professionals where appropriate. The registered manager worked with health care professionals to ensure people's needs were met.

## Is the service caring?

### Our findings

People told us the staff were very caring. They said the quality of care provided was good. One person said, "The carers are marvellous."

The staff knew people who used the service well and had built a good relationship with them. People commented that staff treated them well and took time to listen to what they had to say. Staff were aware of people's likes, dislikes and preferences. For example, they mentioned one person liked to eat certain food for breakfast.

People's privacy and dignity were protected. For example, staff ensured that they closed doors before helping people with personal care. Staff told us they always checked before providing personal care and ensured people were happy to continue.

We saw people were encouraged to express themselves and make as many decisions as they could. They were involved in deciding how their needs should be met. Where they were not able to do so, their representatives were involved.

People were encouraged to maintain their independence wherever possible, for example to shave themselves. One member of staff told us, "I encourage the service users [people] to put their shoes on." This helped to ensure people maintained their abilities in some areas of their care needs.

The registered manager ensured that people were not treated differently or less favourably, based on their specific protected characteristic, including areas of nationality, gender, disability, religion or belief, sexual orientation and age.

Information about people was treated confidentially. Staff were aware that people's private information should not be disclosed to a third party without their consent. Confidential information was stored safely and was locked away when not in use.



## Is the service responsive?

### Our findings

People commented positively about the care and support they received. One person told us, "The staff are very good."

We found people's care plans were individualised and focused on areas of care people needed. For example, one person needed help with the administration of eyes drops and this was recorded in their care plan. People were at the centre of the service provided.

Care plans were reviewed and updated when people's needs changed. One person told us, "They [staff] always check if I am fine." Staff felt care plans had enough information to enable them to meet people's needs and they were informative. People were able to make choices about their lives and were part of the decision-making process. One person said, "I can choose if I want the carers to come at another time." Information about people's last wishes about their death was recorded and this helped to ensure they were supported at the end of their life to have comfortable and dignified deaths.

People's social and emotional needs were considered. This was because people were asked about social activities and hobbies they enjoyed. People were supported to pursue their interests and maintain links with the community. This helped to help ensure they were not socially isolated.

People and relatives told us they were happy with the service received and they did not currently have any concerns. One relative said, "I will speak to [registered manager] or staff if I have any concern." There was a procedure in place informing people and their relatives on how to make a complaint.

Staff knew how to respond to concerns raised by people and to report them immediately to the registered manager or provider. People were assured that complaints would be investigated and action would be taken as necessary.

No formal complaints had been received since our last inspection. We saw the service had received a number of compliments from people and their representatives. For example, one relative wrote, "We would like to say a special thank you to you all for the fantastic care and kindness that you all gave to [family member]. Professionalism shines through."

## Is the service well-led?

### Our findings

People, their representatives and staff commented positively on how the service was managed. One person said, "I am very happy with the agency."

There was a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The management team was approachable and worked with the relatives and staff to ensure people were supported appropriately. Records showed that relatives were kept up to date with what was happening at the service and any changes in the care needs of their family members. The management team had a 'hands on' approach to delivering the service which enabled them to build up positive relationships with the staff, people using the service and their representatives.

Staff told us the management team was always available if they needed any advice or support. One member of staff said, "The managers are absolutely wonderful." Staff demonstrated a clear understanding of what was expected of them. They were able to contribute to the continued improvement of the service through regular team meetings. Staff told us that communication between them and the management team was good. They had a good understanding of the ethos of the service.

The registered manager carried out regular checks to make sure people were receiving care and support to expected standards. These included regular spot check on staff to ensure people were receiving care and support as they had requested or agreed. This demonstrated the service had an approach towards a culture of continuous improvement in the quality of care provided.

The management team was aware of when Care Quality Commission (CQC) should be made aware of events and the responsibilities of being a registered manager.

The provider had a range of policies and procedures governing how the service needed to be run. They informed us that they were in the process of reviewing and updating the policies and procedures to reflect the latest guidance and regulations within the health and social care field.

The provider continually sought feedback about the service from people, relatives, staff and other professionals. These were done through the use of yearly satisfaction surveys. We looked at some of the surveys which were completed recently and noted the feedback received was positive. One person wrote, "I have been with this company for about a year now and I have been very satisfied, they are always ready to help when needed, they can't do enough for you."

The management team had good links with a number of social care professionals and worked closely with them to ensure people received good quality care and support.

