

Destiny Support Care Limited

Destiny Support Care

Inspection report

36 Pankhurst Crescent
Stevenage
Hertfordshire
SG2 0QF

Date of inspection visit:
23 November 2016
24 November 2016
25 November 2016
28 November 2016

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20 December 2016

Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

The inspection took place on 23 November 2016 and was announced. We gave the provider 24 hours' notice of the inspection to make sure that a member of the management team would be available to meet us. We contacted staff and people who used the service on the 24 and 25 November for feedback about the service. The inspection was a focused inspection which was in response to concerns raised about the safety and well-being of people who used the service.

At our last inspection on the 1 March 2016 we found that Destiny Support Care was meeting required standards. At this inspection we found they required improvement.

Destiny Support care provides personal care to people living in their own homes. There were 17 people using the service on the day of our inspection.

The service had a registered manager in post who was also the provider for the service. They were on leave at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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 and associated Regulations about how the service is run.

There was an electronic monitoring system in place and this was audited to ensure people received their calls. However, people did not always receive their calls on time and there were not sufficient gaps between calls to ensure staff had time to travel to the next call.

People told us that they felt safe, happy and well looked after in their own homes. Staff had received training in how to safeguard people from abuse and knew how to report concerns, both internally and externally. Safe and effective recruitment practices were followed to ensure that all staff were suitably qualified and experienced.

The environment and equipment were regularly checked to keep people safe.

Trained staff helped people to take their medicines safely where required. Identified and potential risks to people's health and well-being were reviewed and managed effectively.

The registered manager was approachable and staff felt supported. People and staff were positive about the management of the service and knew the management team well.

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 not always safe.

People did not always receive their calls at the times they wanted.

People felt safe using the service.

Safe and effective recruitment practices were followed to help ensure that all staff were fit, able and qualified to do their jobs.

People were supported to maintain their safety by staff trained to recognise and respond effectively to the risks of abuse.

Requires Improvement ●

Is the service well-led?

The service was not always well led.

Effective systems were not in place to monitor the quality of the service provided or to ensure that people were receiving their calls when they wanted.

People and staff were positive about the management team.

Staff understood their roles and responsibilities and felt supported by the management team.

Requires Improvement ●

Destiny Support Care

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 was meeting the legal requirements and regulations associated with the Health and Social Care Act 2014 and 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 23 November 2016 and was carried out by one inspector. We gave the provider 24 hours' notice of the inspection to make sure that a member of the management team would be available to meet us. Before our inspection we reviewed information we held about the service.

During the inspection we spoke with four people who used the service, four relatives and five staff members, the administrator and the deputy manager. The registered manager who is also the provider was on leave at the time of the inspection. We received feedback from the local authorities. We reviewed one person's support plan. We also reviewed records relating to the management of the service which included two staff personnel files.

Is the service safe?

Our findings

People told us that they felt safe receiving a service from Destiny support care. One person said when asked if staff made them feel safe, "Yes I have confidence with their ability, they know what they are doing and I have 100% confidence in them." A relative said, "Yes because they know my [Relative] well. They provide good care and [Relative] is happy with them."

People and their relatives told us they were happy with their care and the way staff supported them. However, the one issue they had was about staff turning up on time. One person said, "Overall I am happy with the care but they have problems with time keeping." They went on to explain they had been late on more than one occasion attending their day club due to staff turning up late. A relative told us, "My [Relative] has three calls; they do struggle with call times." They went on to confirm that they had been up to an hour late. One person told us that they can sometimes come early in the evening and they were put to bed earlier than they would like. They commented, "I have been in the middle of watching my television programme and it can be frustrating." People told us that staff never missed calls; they would always be called to inform them if staff ran late. One staff member said, "When I'm running late I will call the office or the clients to update them. It's important to let them know you are running late to stop them from worrying."

We saw that the actual times preferred were not always met when we looked at the electronic monitoring system. We found that staff rotas had not incorporated travel time and were not arranged in a way that supported people receiving their calls on time. For example, we saw that for one staff member their first call started at 08:00 hours and was a two hour call ending at 10:00. However, their next call to attend had the start time of 09:00 so was scheduled to start half way through the first call. We saw many other examples of calls ending later than the starting time of the next call. One staff member confirmed that this does happen and they explained that they know the people well and will call to ask if they could start earlier and they manage the calls and ensured us that no calls were missed. They also said when talking about putting people to bed early, "Sometimes you finish earlier than the start time of your last call and instead of waiting I have turned up early and explained that I would have been waiting outside in my car." This meant that people were not supported to have their care at the preferred times and that support was managed around staff availability and to prevent staff from waiting between calls.

Due to the ineffective planning of staff time and rotas, and staff providing calls when it was more suitable to them, we found the service to be in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 as the provider did not ensure people's care needs were met in a way which reflected their preferences.

Staff had a good understanding of how to keep people safe. This included how to recognise and report abuse. We saw that this information was also in the staff handbook to help raise awareness. People had risk assessments completed to help ensure they received their care safely. Staff were able to describe what constituted abuse and gave clear examples of what signs of abuse might be and were confident about how to report any concerns they had. All staff had received training in safeguarding adults. One staff member who was asked what they would do if they had any concerns said, "I would first tell my manager as per

protocol and I would if required contact the local authority or CQC." They were also aware of raising concerns using the whistle-blowers policy. Another staff member said, "I would always report concerns to my manager."

There were safe and effective recruitment practices to help ensure staff were of good character, physically and mentally fit for the role and able to meet people's needs. New staff did not start work until satisfactory employment checks were completed and all new staff had to complete an induction process to help ensure they were competent. We found that the provider made all the appropriate pre-employment checks. These included reference and DBS checks

We saw that where accidents or incidents had happened that these had been documented and investigated to ensure people were kept safe and risks of further occurrences were mitigated. One staff member confirmed these incidents were discussed and we saw evidence that other professionals were involved where required. For example, in one incident due to the person's changing needs the advice of physiotherapist was sought to ensure that the staff and the person were safe. Reviews risk assessments; staff training and supervision were also completed to help ensure risks of a reoccurrence were reduced.

We found that most people we spoke with managed their own medicines and there was not a need for staff to administer these. However, where staff did assist people to take their medicine, this was documented and checked regularly by the senior staff. Staff told us they had received training on how to manage and administer medicines. One staff member said, "Yes I have had my medicine training." This helped to ensure People were kept safe.

Is the service well-led?

Our findings

At the time of the inspection the registered manager who was responsible for the day to day running of the service was on leave. The service was being managed by the administrator and senior care assistants. There were systems in place to monitor the service. We found that people who used the service and the staff team had their views sought. The administrator confirmed that people were regularly asked if they were happy with the service they received. However, systems in place currently had not identified the issues we found in relation to late calls. Although people's views were sought, and they had stated that late calls were a problem, this had not been recognised as an issue. The administrator confirmed after the inspection that they were reviewing the way they managed rotas and that they were in talks with people about their preferred time in order to rectify the issue. However, this was an area that required improvement.

People were positive about the quality of care that they received. One person said, "The staff are really caring and go the extra mile." People we spoke with had experience of using other services prior to changing to Destiny Support Care. We were told that the care they now received was much better. People and their relatives were quite clear that they felt the care that Destiny Support Care provided was excellent and the only negative feedback people had was around time keeping.

Staff were very positive about the leadership and the registered manager in particular. One staff member said, "The registered manager is approachable and they are open to ideas." Staff confirmed that the registered manager was visible and confirmed they had worked alongside them. The administrator confirmed that the registered manager performed spot checks to help ensure that staff were working in accordance with best practice and were working in accordance with their vision for the service. Staff were clear about their roles and responsibilities. One staff member said, "All the staff go over and above." For example they told us that staff ran errands for people to give them the support they need, such as picking up shopping on their way.

Staff told us they felt supported by the registered manager and had the options to attend regular meetings. They also confirmed that they had received supervisions and were supported with training. We saw examples of meetings that had taken place and they demonstrated that a wide variety of topics were discussed, from staff giving plenty of notice when booking annual leave to remembering to log in and out of calls to ensure times were recorded.