

Diadem Care Limited

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Inspection report

27 Albrighton Drive
Kidderminster
DY10 2NX

Tel: 07511591541

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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

Diadem Care Limited is a domiciliary care agency providing personal care to people in their own homes. The service supports elderly people, younger adults and people with physical disabilities. At the time of our inspection there were 5 people receiving the regulated activity of personal care.

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.

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

People told us they felt safe. There were enough staff to meet people's needs. Staff were aware of their responsibilities to report concerns and understood how to keep people safe. Individual risks were identified, and staff had risk management guidelines to rely on and used these to inform the support they provided to people. People received their medicines as prescribed.

People were enabled to have maximum choice and control of their lives and staff provided them with care in the least restrictive way possible and in their best interests. The policies and systems in the service supported this practice.

People felt the service was well run by the provider who knew people well. Regular checks were completed of records, and feedback was collected from people, their relatives and staff. This helped ensure the service was able to act on any need for improvement. People, relatives and staff were complimentary about the management of the service. The registered manager promoted a positive, transparent and open culture where staff worked well as a team.

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

Rating at last inspection

The last rating for this service was Good (published 12 September 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good. This is based on the findings at this inspection.

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.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Good ●</p>

Diadem Care Limited

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 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.

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 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, including notifications of significant events. We contacted the local authority to ask for feedback. We used the information the

provider had 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. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager. We reviewed a range of records. These included care records for 3 people and 3 staff records. A variety of records relating to the management of the service, including audits, were also reviewed. As part of the inspection, we spoke with 3 people who used the service and 3 relatives of people. Five care workers provided us with their feedback on their experience of the service via email.

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 good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from abuse and avoidable harm. The provider had systems and processes in place to safeguard people from abuse. These included safeguarding and whistleblowing policies.
- People and their relatives said they felt the service was safe. One person told us, "I feel 100% safe. They (staff) go above and beyond." Another person's relative told us, "The service is safe."
- Staff completed training around safeguarding adults and were able to explain how they would respond to safeguarding concerns to ensure people remained safe. A member of staff told us, "If I witness or suspect abuse, I will call and report to my line manager. They will investigate and report to Worcestershire County Council and CQC after ensuring the service user is safe and protected."

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks. Risk assessments included risks associated with fluid and nutritional intake, moving and transferring, infection control, medicine management and skin integrity.
- People had a separate environmental risk assessment carried out to ensure the premises were safe for the person and staff.
- The provider used electronic call monitoring. The system enabled office staff to see the location of staff and alerted them if care staff had not arrived on time to provide care. This reduced the risk of people experiencing late or missed care calls.

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 MCA 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 Mental Capacity Act (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 found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.
- Staff had received training in MCA. A member of staff told us, "It is an act of law that protects service users from abuse by service providers, family members and friends. It promotes the respect of service users"

decisions, wishes, feelings and their choices. For example, such as what they wear, eat or drink."

- People told us their choices were respected. One person told us, "The carers will respect if I prefer and want to stay in bed. They know about my food allergies and know that I like my tea milky."

Staffing and recruitment

- People and their relatives told us they were supported by a consistent team of staff. One person said, "I get regular carers whom I know and who know what I need." Another person told us, "It's a total partnership with my carers and the agency."
- People and their relatives told us staff were mostly on time and they were notified of any delays. One person told us, "They are on time for visits unless delayed by heavy traffic. They will text or phone me if delayed." Another person told us, "Mostly they are on time and might sometimes be 10-15 minutes late due to traffic. If longer than that, then they (office staff) will let me know."
- Appropriate checks were in place before staff started working for the service, which included providing full work histories, references and a Disclosure and Barring Service (DBS) check. DBS provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People received their medicines safely. One person's relative told us, "They (staff) dish medicines out in the right doses at the right times and record them."
- Medicine records were checked and audited to ensure there were not any errors and people were receiving their medicines safely.
- People's medicine records were up-to-date and accurate. We found no gaps or omissions in medicines administration records. Staff had been trained in how to administer medicines safely and had their competency to do so regularly checked.

Preventing and controlling infection

- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- Staff had received training in infection prevention control (IPC) and supported people to minimise the risk of infection in their homes.
- The provider had ensured there was sufficient stock of personal protective equipment (PPE) in place which was accessible to staff.
- The provider's business contingency plans included risks related to COVID-19.

Learning lessons when things go wrong

- There was a system in place to report, record and monitor incidents and accidents to help ensure people were supported safely.
- Learning was shared with staff and if further training was identified, this was implemented.
- People and staff told us the registered manager responded quickly to make changes and deal with any emerging issues or problems.

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.

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

- The registered manager created a positive culture with good outcomes for people. People using the service were happy with the service they received. One person told us, "I've met the manager and she is lovely. She will listen to what I have to say. She is easy to get on with and I can phone her anytime." Another person told us, "They are so good. Understanding, empathic, very switched on and up-to-date. Exceptional people."
- The management team worked collaboratively to ensure people received good quality care from staff who knew them well. A healthcare professional told us, "Diadem have gone above and beyond for many of the adults I have worked with. Recently, for example, they stayed with [person] for additional hours awaiting an ambulance, ensuring his comfort, safety and wellbeing, supporting him in a particularly scary time off their own back."
- Staff told us they enjoyed working at the service and felt well supported by the management team. A staff member told us, "She (registered manager) is excellent. Whenever I need help, she will be there. She is very polite, patient and helpful. It is a pleasure working for her."

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 registered manager understood the duty of candour requirements and ensured information was shared with the relevant people when any concerns were identified.

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

- People and their relatives praised the management of the service. One person's relative told us, "They are regularly here on time and do what they need to. So, we think they are managed well and the service runs smoothly. They are reliable. Once [Name] had an appointment and gave them (the office) the wrong time. The office checked and carers came when they were needed."
- Policies and procedures were in place and were kept updated. These included a continuity plan for the smooth running of the service in any unforeseen event.
- The provider had quality assurance systems in place which were used effectively to monitor key aspects of the service. The management team completed audits and checks on a regular basis and acted to improve the service.

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

- The registered manager engaged with people, relatives and staff on a regular basis. There were several systems in place to gain feedback, which included surveys and personal visits by the registered manager.
- People's equality characteristics had been considered and people were supported in line with their diversity, cultural and religious beliefs.
- Staff told us there was good team work, they felt involved and were encouraged to attend team meetings. A member of staff told us, "We benefit from team meetings as we get to discuss issues and challenges we face, as well as how to improve our services to our service users."

Continuous learning and improving care; Working in partnership with others

- People's care plans clearly stated advice from other healthcare professionals. Staff were aware of this information and knew how they should support people in line with it.
- Staff worked with many external parties, including local health and social professionals. Feedback gained during and after the inspection confirmed this cooperation had proved to be effective. One professional commented, "Diadem is one of the very few services we have no concerns regarding, they are easy to get hold of, will support wherever possible with all sorts of weird and wonderful requests, as you can imagine within adult social care. Professionally, I believe the service is working well."