

Dimensions (UK) Limited

Dimensions Teeside Domiciliary Care Office

Inspection report

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11 June 2021

15 June 2021

18 June 2021

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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?

Outstanding ☆

Summary of findings

Overall summary

About the service

Dimensions Teeside Domiciliary Care Office is a domiciliary care agency supporting people with personal care in their own homes. All of the people supported were living with either a learning disability and/or autism spectrum disorders. At the time of our inspection 97 people were being supported.

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 using this service and what we found

The service had a track record of being an excellent role model for other services. The registered manager and provider had created a clear culture of striving for excellence through partnership working, consultation, research and reflective practice. Staff were motivated by and proud of the service. There were consistently high levels of constructive engagement with people, relatives and staff.

People and relatives spoke positively about the support provided by staff, who they described as caring and kind. Staff supported people to live as full and fulfilling a life as possible. People and relatives said staff valued people as individuals and treated them with dignity and respect.

Medicines were managed safely. Risks to people were assessed and addressed. Staff were well-matched to the people they supported, and people were involved in their recruitment. People were safeguarded from abuse.

Staff received regular training, supervision and appraisal. 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. Staff worked effectively with external professionals to ensure people received the healthcare support they needed.

Support was based on people's assessed needs and preferences, which were regularly reviewed. Effective systems were in place to investigate and respond to complaints.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. Support was designed to promote people's control of their lives and promote their

independence. Care was personalised and delivered in a way that respected people's privacy and dignity. The service had clear culture of empowering people to live the lives they wanted.

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

Rating at last inspection

This service was registered with us on 28/01/2020 and this is the first inspection. The last rating for the service at the previous premises was good, published on 20/04/2018.

Why we inspected

This was a planned inspection to give the service a rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our well-led findings below.

Dimensions Teeside Domiciliary Care 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

An inspector and an Expert by Experience carried out this inspection. 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 and specialist housing.

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.

Inspection activity started on 10/06/2021 and ended on 18/06/2021. We visited the office location on 18/06/2021.

What we did before the inspection

We reviewed information we held about the service, including the notifications we had received from the provider. Notifications are reports on changes, events or incidents the provider is legally obliged to send us within required timescales. We reviewed information we had received about the service since the last inspection.

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

The provider was not 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. We used all of this information to plan our inspection.

During the inspection

We spoke with 15 people and 11 relatives about their experience of the care provided. We spoke with 14 members of staff, including the registered manager, locality managers and support staff.

We reviewed a range of records. This included six people's care records and 10 medication records. A variety of records relating to the management of the service, including policies and procedures, were reviewed.

After the inspection

We obtained feedback from five external professionals who work with the service.

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. 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 said they felt safe with staff. One person told us, "I feel safe because the staff look after me."
- Staff received safeguarding training and said they would immediately take action if they had any concerns.

Assessing risk, safety monitoring and management

- Risks to people were assessed and action taken to reduce the chances of them occurring. One person we spoke with said, "I feel safe because the staff are about."
- Accidents and incidents were closely monitored to see if improvements could be made to keep people safe.

Staffing and recruitment

- Staffing levels were monitored to ensure enough staff were in place to provide safe support. One member of staff said, "We have more than enough staff."
- People were involved in recruiting staff, who were matched to people based on their knowledge and skills.
- Checks were carried out to reduce the risk of unsuitable staff being employed. This included obtaining written references and a Disclosure and Barring Service check.

Using medicines safely

- Medicines were managed safely and people received these when they were needed. One person told us, "The staff give me my tablets without any problems."
- Staff received training in medicines management and had their competencies checked to ensure they provided safe support.

Preventing and controlling infection

- Effective infection prevention and control (IPC) systems were in place. Staff received IPC training and used appropriate personal protective equipment such as gloves and aprons.

Learning lessons when things go wrong

- Accidents and incidents were monitored to see if lessons could be learnt to keep people safe. This included a provider level group proactively reviewing incidents to see if steps could be taken to reduce the chances of them reoccurring.

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. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- Detailed assessments of people's needs and preferences were carried out to ensure appropriate support was in place.
- People, relatives and external professionals were involved in assessments to help ensure people's voices were heard. One external professional said, "Issues are identified and reported quickly which enables plans to be put in place."

Staff support: induction, training, skills and experience

- Staff received regular training to ensure they had the knowledge and skills needed to support people effectively. One member of staff told us, "Training is monitored very closely to see if it needs to be updated."
- Newly recruited staff had to complete the provider's induction programme before they could support people. This included completing training and observing experienced members of staff.
- Regular supervision and appraisal meetings took place, which staff said they found supportive.

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

- People received effective support with eating and drinking. One person told us, "The staff prepare the food, they keep it balanced and nutritious."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked closely and effectively with external professionals to promote people's health and wellbeing. One external professional told us, "They can evidence dates and times of health appointments, annual health checks, flu jabs, Covid vaccines etc, which is vitally important."
- People and relatives told us staff supported people to access healthcare services and support. One person said, "They take me to the opticians, dentist and come into the doctors if I choose."

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

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.

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.

- Systems were in place to ensure people's support was delivered in line with the principles of the MCA and with appropriate legal authority.
- People and relatives said people's decisions were respected.

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. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People spoke positively about the support they received from staff. One person said, "The staff are very kind and good to us, they do an amazing job. They are really caring and are concerned if we have any issues we can talk to them."
- Staff had professional but close and friendly relationships with people. One person told us, "The staff are very friendly, kind and very caring."
- Staff valued people as individuals and supported them to lead the lives they wanted. A relative told us, "They treat [named person] as an individual and respect his choices."
- People were supported to develop and maintain relationships of importance to them.

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

- People were supported to express their views and make their voices heard to ensure they received the support they wanted. One person said, "I receive the care I want."
- Feedback was regularly sought from people and relatives to ensure they were happy with their care.
- Advocacy support was put in place where needed. Advocates help to ensure that people's views and preferences are heard.

Respecting and promoting people's privacy, dignity and independence

- People were supported to set and achieve goals for what they wanted to achieve in life. An external professional said staff were, "aware of the importance of promoting independence and maximising skills."
- People were supported to maintain and promote their independence and lead the lives they wanted. One person said, "I definitely recommend the service, 100%. They are brilliant and help with my independence."
- Staff treated people with dignity and respect. One person told us, "The staff absolutely treat me with respect. They knock on my door and ask to enter. There is no problem with dignity."

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. This meant people's needs were met through good organisation and delivery.

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

- People were actively involved in planning their support, which was based on their needs and choices. One person said, "I am involved in the care plan meetings and our relative likes being involved too."
- Support plans were regularly reviewed to ensure they responded to people's needs. One person told us, "I definitely receive the care I want. The staff bend over backwards and are great."
- Effective systems were in place to ensure staff were updated on people's ongoing welfare and preferences.

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.

- Staff were knowledgeable about people's communication support needs and helped them to express themselves. A relative told us, "I definitely recommend Dimensions. They are really focussed on [named person] being a human being and understand him."
- Information was made available to people in the most accessible format for them.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Some people received support to maintain and develop relationships and hobbies. Where this was the case people said staff helped them do the things they wanted to.

Improving care quality in response to complaints or concerns

- Systems were in place to investigate, learn from and respond to complaints.

End of life care and support

- At the time of our inspection nobody at the service was receiving end of life care, but policies and procedures were in place to provide this should it be needed.

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 outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Continuous learning and improving care; Working in partnership with others

- The service worked in successful partnership with others to build seamless experiences for people based on good practice and people's informed preferences. This included working with local communities and services to inform and support them to adapt to the needs of people and be inclusive, rather than people having to adapt to the community and/or service requirements. For example, the registered manager had helped develop and deliver training for GPs to improve the experience of people with learning disabilities when attending appointments. In one case this had led to a clear improvement in one person's health outcomes and positive changes made to the practice of the person's GP surgery.
- The registered manager and staff strove for excellence through consultation, research and reflective practice. As a result, innovative solutions had been developed to overcome problems and ensure people received person centred, effective and improved care. For example, a new system had been developed by the registered manager to review people who might need additional support. This involved staff and external professionals involved in a peoples care undertaking joint learning and partnership working to ensure people received the support needed.
- External professionals spoke extremely positively about how the service worked in partnership with them to ensure people received high-quality care. Comments included, "They always appear transparent and forward thinking. Where I have had an issue in the past and have needed to contact a senior manager the issues have been resolved and I have been listened to" and "The team as a whole are able to problem solve within their own abilities as a provider. They are also comfortable to pull on other professionals to intervene and welcome their support and work together as a multidisciplinary team."

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

- People and relatives told us the service had a clear vision and values that put people at the heart of the service. Comments included, "They train me to get back into society", "Our relative has been allowed to achieve his outcomes", "You hear so many bad stories of other companies. The staff here put themselves out for [named person's] sake" and "I definitely recommend Dimensions. They are very supportive of the family, they go on and beyond. They love [relative] and treat [relative] as family."
- Staff were clear and passionate about the service's culture and values, and embodied these as they delivered the support people wanted and needed.
- Staff provided holistic support that improved the overall life experiences of people. Support plans were written with people and strongly reflected people's preferences, objectives and goals. Regular and pro-

active reviews took place to see how people were progressing with these and contained evidence of staff providing very effective support to people to achieve their outcomes and goals.

- External professionals told us that staff consistently achieved excellent outcomes for people they supported. Comments included, "The transformation of these individuals, including the change in their health, has been remarkable. There is agreement from community nursing colleagues, [named professional] and I that their quality of life has improved significantly" and, "[The service is] very good at supporting people to feel good about themselves raising self-esteem and promoting independence. They are proactive with engaging clients in exercise to promote an optimum level of mental health and wellbeing."
- Staff were highly motivated by and proud of the service. Comments from staff included, "The best I've ever worked for. I was a support worker for a while for several other companies. I feel happier and more supported than anywhere", "Best organisation I've ever worked for", "I love it, think this is me now forever. Good managers, and I have a passion for the job. Dimensions are always there for you" and, "I don't know of anything that could be improved. What they do well is look out for their staff."
- The registered manager and staff were open and transparent, and regularly involved people and their relatives in honest and meaningful conversations about the support people received. An external professional told us, "Dimensions are a very open and transparent."

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

- The registered manager and provider had clear, effective and robust systems in place to monitor and improve standards at the service. The provider's culture and values were embedded into reviews of quality performance, and high standards were expected and achieved. Quality assurance checks were proactive at identifying and resolving issues.
- Staff at all levels of the service were expected to reflect upon their professional practice and on whether improvements could be made to how they provided support. In this way quality monitoring and improvement were a continuous process and staff were clear about their role in ensuring quality services were consistently provided and improved upon.
- People and relatives spoke very positively about the management and leadership of the service. They gave us examples of issues they had spoken with the registered manager or staff about, which were resolved quickly and effectively for them.
- Required notifications had been made to us in a timely manner.

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

- Robust systems were in place to proactively seek feedback from people, relatives and staff. People and relative said they felt heard by the service and that they could comfortably raise issues. One person said, "The staff talk to me and I can talk to them about any problems and they will help." A relative we spoke with told us, "There is very good interaction between the staff and [named person]. They always have time to talk."
- The registered manager and provider regularly reviewed how feedback was sought to ensure everyone had a chance to contribute. A range of tools, including easy read format booklets, was used to involve people in having their say. Staff worked hard to ensure everyone had their voice heard.
- Feedback was used to drive improvements at the service. Where people, relatives or staff raised issues they were addressed.