

DHR Support Services Ltd

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Inspection report

24 Chailey Avenue
Enfield
Middlesex
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29 March 2021
13 April 2021

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service caring?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

DHR Support Services Ltd is a domiciliary care service providing personal care to people living in their own home in the community and within supported living projects. At the time of the inspection the service was supporting people with a learning disability and autistic people and people with a mental health condition. The service was supporting three people at the time of the inspection.

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

People were happy and content with the care and support they received from DHR Support Services Ltd.

Relatives of people using the service spoke positively of the service and the care and support that their family member received, stating that the service worked in partnership with them and their family member ensuring their needs were appropriately met.

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. The model of care and setting maximises people's choice, control and independence. Care is person-centred and promotes people's dignity, privacy and human rights. The ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives

We observed people interacting with support staff in ways which assured us that people felt safe and were happy in the ways in which they were supported. Staff knew the signs to look for if abuse was suspected and told us of the actions they would take to protect people from abuse.

Support plans detailed people's identified risks associated with their health and care needs, with clear guidance to staff on how to manage those risks to keep people safe.

Policies and systems in place gave assurance that people's medicines were managed and administered safely ensuring people received their medicines as prescribed.

We observed sufficient numbers of staff available to assist people with their assessed needs. Recruitment processes ensured that only those staff assessed as safe to work with vulnerable adults were employed.

Support plans were person centred and detailed, giving support staff the appropriate information and guidance to support people with their needs and wishes.

Management oversight processes in place enabled the service to monitor the quality of care people received. Where issues were identified these were addressed immediately with further learning and development implemented to improve people's experiences.

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 09 November 2017).

Why we inspected

We carried out an announced comprehensive inspection of this service on 19 October 2017. The service was rated good at that time. Due to the length of time since the last inspection, we undertook this focused inspection to check and confirm that the service continued to meet legal requirements.

We reviewed the key questions of safe, caring and well-led only to check and ensure people were receiving safe, good quality care.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

During this inspection we did not identify any areas of concern and found that the service had continued to meet legal requirements. Please see the safe, caring and well-led sections of this report for further detail.

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 caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

DHR Support Services Ltd

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

This inspection was carried out by two inspectors. One inspector visited the registered office and the supported living scheme and the second inspector completed inspection activity by e-mail and phone.

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own home. This service also provides care and support to people living in one 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave the service short 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 29 March 2021 and ended on 13 April 2021. We visited the supported living scheme on 29 March 2021 and visited the office location on 13 April 2021. In addition to the on-site inspection, we also completed the inspection via phone and e-mail. On 09 and 12 April 2021 telephone calls were made to people, relatives and staff to gain their feedback.

What we did before the inspection

We reviewed information we had received about the service since the last inspection and formal notifications that the service had sent to the CQC. Notifications are information that registered persons are required to tell us about by law that may affect people's health and wellbeing.

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

During the office visit, we spoke with the registered manager and a support worker. We reviewed five staff recruitment records, one person's care plans and risk assessments and medicine management records. We also reviewed health and safety records.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at a further two care plans, policies and procedures, quality assurance information and training information. We spoke with one person, two relatives and five support staff.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Policies and systems were in place for support staff to follow to safeguard people from the risk of abuse.
- One person, when asked if they felt safe stated, "Yeah, I do feel happy and safe."
- One relative's feedback about the safety of their family member included, "They [support staff] have a good understanding."
- Staff had received training in safeguarding procedures which was refreshed regularly.
- Staff demonstrated a good understanding of safeguarding, how to recognise possible signs of abuse and how to report their concerns.
- Staff understood what whistleblowing was and who to report any concerns to.
- The registered manager clearly understood their responsibilities around identifying and reporting all concerns to the appropriate authorities.

Assessing risk, safety monitoring and management

- Comprehensive risk assessments were in place which identified and assessed risks associated with people's health, care, social care and mental health needs.
- Management plans in place guided staff on how to manage and minimise the risk so that people were kept safe and free from avoidable harm.
- Risk assessments covered risks associated with behaviours that challenge, going out, health conditions including epilepsy and moving and handling. These were reviewed every six months or sooner where identified risks had changed.
- Health and safety checks were in place which included fire safety and management to ensure people's safety in the event of a fire.

Staffing and recruitment

- During the inspection we observed sufficient numbers of staff available to support people safely.
- Staffing levels were determined based on people's needs.
- Relatives told us that there were always staff available especially where people were allocated a set number of staff to support them with their needs. One relative told us, "[Person] has 24-hour care. The manager is very protective of her and if she goes out for a walk there is always someone with her."
- People were supported by staff who had been checked and verified as suitable to work with vulnerable adults. Pre-employment checks completed included checking for any criminal convictions, conduct in previous employment and proof of identity.

Using medicines safely

- Policies and systems in place ensured people received their medicines safely.
- Medicine Administration Records (MARs) were seen to be complete and no gaps in recording were identified.
- The care plan and risk assessment clearly documented the level of support the person required with their medicines and how support staff were to provide the support safely.
- Support workers received appropriate medicines administration training followed by an observed assessment to ensure that they were competent to administer medicines.
- Weekly and monthly medicines audits and checks were completed to ensure people received their medicines safely and as prescribed.

Preventing and controlling infection

- People were protected by the safe use of infection control practices.
- An increase in daily cleaning had been implemented around the scheme during the pandemic to prevent cross-infection.
- People were responsible for keeping their flats clean and staff supported them where required.
- People were provided with information about COVID-19 so that they could develop their understanding about the infection and follow the guidance in order to keep themselves safe. People were also provided with PPE to use when out in public places.
- Personal Protective Equipment (PPE), in line with government guidance, was available for support staff to wear when delivering personal care and supporting people. Staff had received training on infection prevention and control and the effective use of PPE.

Learning lessons when things go wrong

- Accidents and incidents were documented and included details of the event and actions taken at the time.
- Accidents and incidents were monitored to ensure lessons were learnt to prevent future re-occurrences and keep people safe.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- During the inspection we observed people being well treated and as equal partners in their care and support.
- One person described their support as being "fun" and explained that they enjoyed cooking. They told us, "I am a good cook and I like cooking rice and chicken, pasta and eggs."
- Relatives' feedback included, "They [support staff] communicate quite well with her. When we call the service, we ask for staff to support her with tasks and they do. We check with person and she says that they helped her" and "Yes, they speak up when they notice any change."
- Support staff explained how they had established positive and caring relationships with people they supported which enabled them to deliver good person-centred care. One support worker explained, "I know them [people] really well, they are very talkative. They let us know what they like and dislike. Recording in their folders, one person dislikes the texture of certain food that resemble eggs and so we are aware of this when planning meals."
- People's diverse needs, as defined under the Equalities Act 2000, were respected. For example, people's needs related to their relationships and religion had been documented in their care plan.

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

- Care plans documented people's needs, preferences, likes and dislikes on how they wished to be supported.
- We observed people were involved in making decisions about their care. During the inspection we heard a support worker consulting a person about an upcoming GP appointment where timings needed to be confirmed.
- Relatives confirmed that they were consulted and involved in the planning and delivery of care for their family member. One relative stated, "I'm involved, we always work together."
- Support workers explained how they delivered care with a person-centred approach. One support staff told us, "Give my best support, treat them as I would like to be treated."
- People were involved in monthly meetings which gave them the opportunity to contribute to the day to day planning of their support.. Topics discussed included activities, meal choices and things people were not happy with.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was upheld. During the inspection we observed people being treated with dignity and respect.

- Staff understood the importance of promoting people's privacy and dignity and gave examples of ways in which this was done. One support worker said, "We remind people of things to maintain their dignity, closing doors, flushing the toilet."
- Support staff encouraged people to be as independent as possible. The service focused on people's skills and abilities, setting goals and tasks for them to achieve. One support staff explained, "Guide them and respect them. The way we talk to them. Age appropriate support, teach them living skills for independence, support likes and dislikes."

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 promoted a positive culture within the service that promoted good care and aimed to work towards achieving positive outcomes for people.
- People knew the registered manager and the support staff well. During the inspection we observed people approaching the registered manager and staff with confidence.
- Relatives spoke positively of the registered manager and support staff stating that they were proactive in supporting people and keeping them updated about their family member's progress.
- Feedback from relatives included, "Manager is very understanding and caring person and keeps us up to date with everything. If manager wasn't so caring and understanding, we wouldn't be able to sleep at night" and, "I know the manager, very professional, always communicates, once a month gets an update from us, makes sure everything is in place."
- Relatives confirmed that they had all been involved in the care planning and review process. One relative said, "I make suggestions as to when the service is delivered, the carers are flexible when I change the times."
- Regular telephone and written contact had also been maintained, especially during the COVID-19 pandemic to provide relevant updates.
- Staff spoke positively about the registered manager and stated that they were well supported, offered continuous training and development and were able to approach them at any time with their concerns.

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 clearly understood their legal responsibilities in relation to being open and honest with people when something went wrong.

Relatives told us they knew who to complain to and were confident their concerns would be addressed immediately. One relative stated, "I would go back to the manager, he takes it very seriously."

- The registered manager was also aware of their responsibility of informing the CQC and other involved agencies where specific incidents had taken place or allegations of abuse had been made.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager had systems in place to monitor quality and risk on a weekly and monthly basis to ensure regulatory requirements were adhered to.

- These processes enabled the service to monitor the quality of service provision, continuously learn, identify issues and make the necessary improvements where required.
- The service demonstrated a willingness to learn and reflect to improve the service people received.
- Throughout the inspection we gave feedback to the registered manager, which was received positively.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People using the service and their relatives were continuously engaged and involved in their care delivery and provision.
- People were encouraged to participate in monthly meetings and give their views and opinions on how the service was run and managed.
- Relatives told us that they received regular telephone calls from the registered manager to obtain their feedback about the quality of care. In addition, relatives also stated that they received satisfaction surveys to complete. One relative said, "The manager always calls for feedback. Questionnaires used to be sent by post, more than once a year."
- Support staff told us that they were also always encouraged to engage and be involved in the management of the service. This was facilitated through supervisions, annual appraisals and monthly staff meetings.
- We saw that the service worked in partnership with external agencies such as psychiatrists, nurses and health professionals to maintain the health and wellbeing of people.