

Destiny Intergrated Care Limited

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Inspection report

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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

Destiny Integrated Care Limited is a domiciliary care agency providing personal care to people living in their own homes or flats. At the time of inspection, the service provided support to 40 people, of which 21 were in receipt 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 using this service and what we found

People spoke positively about the service they received and told us they would recommend the service to others. One person told us, "I can't fault the care. The care is so good." Another person said, "When they first came, I wasn't sure, but now I know them they are brilliant."

People were supported in a safe manner. Care plans and risk assessments provided clear guidance and direction for staff to reduce risk. People and relatives told us they had been involved in the care plan and review process.

Staff were familiar with people's care and support requirements and acted in a timely manner requesting appropriate professional support where they identified changes in needs.

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.

People told us they felt the staff cared for them in a caring and thoughtful manner and felt involved in all aspects of their care. Staff spoke with passion and enthusiasm about their role and those they supported.

The registered manager demonstrated the values of the service and supported staff in the delivery of care. Staff felt supported and valued by the registered manager and found the manager to be approachable at all times.

Quality assurance audits supported driving change and service improvements.

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 requires improvement (published 16 December 2019).

Why we inspected

This was a planned inspection based on the previous rating.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection.

The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Destiny Integrated Care Limited on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

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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 one inspector

Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

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

Notice of inspection

This inspection was announced. We gave the service 24 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 6 May 2021 and ended on 17 May 2021. We visited the office location on 6 May 2021.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback

from the local authority. We looked at all the information which we hold about the service including notifications. This information helps support our inspections. We used all this information to help plan our inspection.

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.:

During the inspection

We spoke with one person who used the service and two relatives about their experience of the care provided. We spoke with four members of staff including the registered manager, care co-ordinator and care workers.

We reviewed a range of records. This included three people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection we recommended the provider continues to review care visit calls times and rota management with a view to focusing on ensuring regular teams of staff support people consistently across the week. The provider had made improvements.

- An electronic call monitoring system had been installed and was embedded in the service. Staff had been allocated to work in agreed areas reducing travel times between visits.
- People and relatives told us they received regular and consistent care staff. A relative told us, "They are like friends of the family we have a laugh between us. We know staff well." Another person told us, "The care staff are brilliant. They never rush me and have lots of patience. If they are going to be late the office always calls me and lets me know"
- Care staff told us that if they were held up, they contacted the office who would inform the next client of a delay in the care staff member arriving.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective systems and processes in place to protect people from harm. The provider held records and logs of safeguarding referrals which they had raised to protect people from harm.
- Care staff had received safeguarding training and were confident of their role and responsibility reporting concerns internally and to external organisations.
- People spoke positively of the care staff and the efforts they took in making them feel safe. One person said, "The staff are aware they need to use specific equipment to assist with moving me safely."
- Care staff were aware of detail within people's care plan and their associated risks. One care staff member told us the risk assessments contained clear identification of specific risks, how to reduce risk and actions to take should change occur or staff have concerns.

Staffing and recruitment

- Pre-employment checks were carried out to ensure staff were recruited safely to the service. This included criminal records checks and satisfactory references being obtained for all staff before they worked with people.
- Care staff told us they completed a thorough induction which prepared them for their role. This involved shadowing of experienced staff, completion of training and checks of staff practise by senior staff and the registered manager.

- A relative told us, "The care staff receive training in looking for changes. They had recently identified a deterioration in (relatives) health and made a referral to a health professional. I wouldn't know what to do on my own."

Using medicines safely

- Care staff received training to administer medicine safely in people's homes. Senior staff completed a competency check of staff practice to ensure they were deemed safe and competent in their practice.
- Care staff spoken with were confident and knowledgeable of the responsibilities they had regarding safe administration of medicines.

Preventing and controlling infection

- The provider had policies, systems and processes in place to promote infection prevention and control.
- Care staff had received infection, prevention and control (IPC) training. In addition, community nurses had provided training to staff during the COVID-19 pandemic on how to wear, put on and take off their personal protective equipment (PPE) safely.
- Care staff told us they had adequate supply of PPE and were able to request replenishment of their stock when necessary.

Learning lessons when things go wrong

- The provider reviewed incidents and people's feedback and used this to drive change and improvement in the service.
- Team meetings and staff supervisions provided opportunity for discussions to take place relating to concerns and ideas for improvement shared.
- Care staff told us they had access to a secure app on their telephones to keep up to date on discussions held at the meetings should they be unable to attend.

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 requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care

At our last inspection we recommended the provider consider current guidance for best practice in regard to staff reflection and continuous learning. We also recommended the provider consider current guidance and best practice for the inclusion of people and staff in developing good care delivery to drive improvements in this area. The provider had made improvement.

- The registered manager used feedback from quality surveys and reviews to drive change and improvement in the service.
- People told us they received regular newsletters updating them of service changes taking place, as well as personal responses from the registered manager if they had concerns.
- Care staff told us they received regular supervision and were supported and encouraged by the manager to develop.

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

- The registered manager demonstrated an understanding of people's needs and preferences and the importance of this to provide person-centred care.
- People and care staff told us they found the manager to be approachable and felt listened to.
- One person told us, "The manager is brilliant, she is so supportive. She listens to what I want and puts this into my care plan."

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

- The manager had a clear understanding of their responsibility of notifying CQC of reportable events.
- The manager completed regular audits of records held and had implemented an action plan to address the findings.
- Care staff told us they felt supported by the manager. One care staff member told us, "The manager has a heart of gold and is always available to speak to and provide support."

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

- People told us they received questionnaires from the manager and feedback was provided either directly with them or through newsletters.
- People told us they would feel confident in contacting the manager if they had concerns and that these would be dealt with in a timely manner.

Working in partnership with others

- The service maintained professional links with the local authority and other health and social care professionals.
- Care staff sought professional guidance and support in a timely manner to maintain people's health and well-being.