

Lancashire County Council

# Preston Domiciliary Service

## Inspection report

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Tel: 01772535945

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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?

Good ●

# Summary of findings

## Overall summary

### About the service

Preston Domiciliary Service is a service which provides personal care and support for adults with a learning disability including Autism Spectrum Disorder and or physical disabilities. At the time of our inspection there were 43 people who used the service within fourteen supported living tenancies, which were staffed by care workers at all times. Each tenancy accommodated between one and five adults.

### People's experience of using this service and what we found

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.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

The opportunities made available to those who used the service clearly had a positive and encouraging impact on their physical, social and emotional well-being. This was confirmed by people we spoke with and their relatives. People were supported by a committed staff team to achieve their goals and to meet their aspirations. One person said, "I think the carers have good spirits and lift me up when I'm feeling down. They sit and talk about anything I want and show a general interest."

People were safe using Preston Domiciliary Service. The practices adopted by the service protected people from harm. The staff team was consistent and the support provided to people promoted continuity of care. Robust recruitment practices were in place. Potential risks were handled well and medicines were managed safely. One person told us, "I generally feel safe with the care I'm having. The carers give me one to one support and there's always someone around to talk to when you need help. I also think the building is safe and secure."

A wide range of training had been provided for the staff team, which helped to ensure people received good care and support, in accordance with their needs. Community health and social care professionals had been involved in the care and support of those who used the service and people's dietary needs were fully met.

People were treated with dignity and respect and were involved in the decision-making process. Their preferences and wishes were respected by the staff team. Care files were very well written and provided staff with clear guidance about people's needs. Detailed information was also available about how to

communicate with people effectively and independence was consistently promoted.

The management and staff team were open and transparent during the inspection process. There was plenty evidence of community engagement taking place. A wide range of regular audits and monitoring was evident. We received very positive feedback about the manager and the staff team.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

This service was registered with us on 26/03/2019 and this is the first inspection.

Follow up: The service will be re-inspected as per our inspection programme. We will continue to monitor any information we receive about the service. The inspection may be brought forward if any risks are identified.

## 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?

Good ●

The service was well-led.

Details are in our well-Led findings below.

# Preston Domiciliary Service

## 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

The inspection team consisted of two inspectors. An Expert by Experience made telephone calls to some people and their relatives. 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 supported living tenancies. 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 48 hours' notice of the inspection. This was because we needed to be sure that someone would be available to support the inspection. Inspection activity started on 10 March 2020 and ended on 12 March 2020. We visited the office location on 12 March 2020.

#### What we did before the inspection

Prior to our inspection we checked all the information we held about the service. This included any notifications the service is required to send to us by law, any allegations of abuse or feedback about the service. The provider was not requested to complete a provider information return at this time. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

#### During the inspection

Some people who used this service had limited verbal communication and therefore it was not possible to obtain their views about the service provided. However, to understand people's experiences we were able to speak with four people who used the service and four relatives. We also requested feedback from ten community professionals and spoke with five staff members, as well as the managers of the service. We looked at several records. These included five care files, medication administration records, two staff files, training records and associated documentation relating to the operation and management of the service.

We used all this information to plan our inspection.

# 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

- The provider had implemented detailed policies, which helped to ensure people who used the service were protected from the risk of abuse. Relatives felt their loved ones were safe using the service.
- Any allegations of abuse were managed properly and the staff team had received relevant training. One person we spoke with told us, "I have no problems with the safety aspect of my care. They [staff] give me a wash. They help make tea and make sure I have everything I need. I also feel safe in the surroundings and with the other people."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The provider had developed systems to ensure people who used the service were kept safe and free from harm. A range of internal checks had been conducted and equipment had been appropriately serviced.
- Risks had been assessed and strategies implemented to reduce the level of potential harm. One family member told us, "The carers are good at managing my relative's mobility with hoists and getting him around the house." Fire risk assessments were in place with any actions being addressed and Personal Emergency Evacuation Procedures had been developed.
- Plenty of health and safety guidance was available for the staff team. Incidents and accidents were recorded and actions taken to support lessons learned. Managers and staff were trained in health and safety and were fully aware of the importance of keeping people safe. Staff and managers knew what to do should they be concerned about someone's safety. The provider had supported staff to be safe in their working day.

Staffing and recruitment

- People who used the service were supported by a consistent staff team, who were fit to work with vulnerable individuals. One person told us, "The carers are very punctual and the service is very strict about that."
- Safe recruitment practices had been adopted and clear disciplinary procedures were in place, which were being followed in day to day practice.

Using medicines safely

- The provider had systems to ensure medicines were managed safely.
- Medicines were administered in accordance with local policies and NICE guidance (The National Institute for Health and Care Excellence.) This is an independent organisation which provides guidance about drugs and treatments available on the NHS England. Key staff had received medication training and were periodically assessed as competent.
- Medicines were administered as prescribed and medication records were well kept. One family member

told us, "My relative takes medication and this is managed very well."

#### Preventing and controlling infection

- The provider had systems and guidance in place, which helped the staff team to maintain good infection control practices. They had received relevant training and Personal Protective Equipment was available. One relative we spoke with told us, "Carers do wear the appropriate protective clothing when dealing with all care."



# 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

- The provider had systems in place to ensure good outcomes were achieved for those who used the service. The staff team effectively ensured people's choices were carefully considered.
- People's needs were thoroughly assessed before a package of care was arranged and they were supported to experience a good quality of life. People and their loved ones were fully involved in the assessment process and in the development of their care plans.
- Records showed that people's oral hygiene was taken into consideration and systems had been implemented to support people to maintain good oral health care.

Staff support: induction, training, skills and experience

- The provider ensured staff were well trained and had the skills and competence to provide the support required by those in their care. Staff had completed a recognised care qualification. They had also received induction, supervision and a range of mandatory training, as well as specific learning relevant to their role and to the needs of those who used the service.
- Knowledge checks were completed following learning modules to ensure staff had understood specific training.
- Staff personnel files were very well organised, making information easy to find.

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

- The staff team supported people to eat a well-balanced diet. People were able to choose what they wanted to eat but were encouraged to make some healthy choices. One person told us, "I am very happy with the food I get. They[staff] put it together very nicely." A relative commented, "The carers are good at preparing his food. For example, they chop it up into little pieces for him to eat."
- Learning for staff in relation to food hygiene was part of the training programme.
- People were supported with meal planning and to help with meal preparation. Specialised diets were catered for.
- Some meal times encouraged social events, such as Sunday roast dinners and Friday night take-aways.

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

- The provider had systems in place to ensure people were supported to access healthcare services in a timely manner.
- It was clear that the service worked well with other health and social care agencies to ensure people

received a good standard of care and support.

#### 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.

- The provider had systems in place to ensure the service was working within the principals of the MCA.
- Mental capacity assessments had been conducted and those who had capacity to make decisions had given their consent to the care and support provided. Plans of care incorporated the decision-making process and these showed that best interest meetings had been held to support people in making decisions.
- Court of Protection applications had been made, as deemed necessary and advocates had been appointed, where necessary. The registered manager told us a flow chart was in place to monitor Court of Protection applications regularly.

# 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

- The provider had systems in place to ensure people were treated equally with any diverse needs being respected.
- We received very positive feedback about the care and support people received.
- People's individual needs were well recorded, along with their likes, dislikes and preferences.

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

Respecting and promoting people's privacy, dignity and independence

- People received good care from a kind and caring staff team.
- We received very positive feedback about the staff and the management of the service in relation to respecting people and promoting their independence. One person told us, "I'm struggling to look after myself and the carers do a good job by giving me all their support and helping me to survive."
- People's privacy and dignity was fully considered and staff were aware of the importance of respecting people as individuals. One person said, "The carers help me to shower and I don't get embarrassed about them being there. I feel the carers know what they are doing and are well trained to look after me."
- The provider had a range of policies in place to help staff to promote people's privacy and dignity and information relating to advocacy services was available. Advocacy seeks to ensure people can have their voice heard on issues that are important to them.

# 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.

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

- The registered manager and staff team clearly encouraged people to develop and maintain relationships.
- People were supported to participate in a wide range of person-centred community activities and to achieve set personal goals and aspirations in accordance with their wishes and preferences.
- Some people had secured voluntary work and one person was planning on attending college later in the year.

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

- The provider had systems in place to ensure the planning of people's care and support was person-centred and tailored to individual needs. Plans of care and risk assessments had been developed, which provided detailed information for staff about individual needs and how these were to be best met.
- People were supported to make a wide range of choices and were encouraged to make decisions about how they preferred their care to be delivered. Some people were supported to make decisions by others who were involved in their care, such as relatives or community professionals.

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.

- The provider was meeting the AIS and good use of technology was evident. The staff team were provided with detailed guidance about people's individual communication needs and these were recorded well within the care planning process.
- The provider had systems in place to enable people to receive information in different formats. This supported those with a variety of communication difficulties or those whose first language was not English. Some records had been produced in picture format, which enabled people to access information.

Improving care quality in response to complaints or concerns

- The provider had implemented systems to ensure complaints were well managed, although none had been received.
- People were provided with clear information about how to make a complaint and those we spoke with said they would feel comfortable in making a complaint, should the need arise. One person said, "The carers

are very friendly and I'm comfortable talking to them and discussing any problem I have."

- Staff told us they would know what to do should someone wish to make a complaint.

#### End of life care and support

- The provider had systems in place to ensure people received appropriate end of life care and support, should this be necessary.
- Policies and procedures were in place and the staff team had received training in relation to end of life care, but as Preston Domiciliary Service supported young adults, it was not always appropriate to discuss people's end of life wishes, unless it became necessary.

# 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 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 and her staff team promoted a positive culture which achieved good outcomes for people.
- The provider had periodically sought feedback about the service from service users, relatives and staff. Feedback received was consistently positive. One person said, "It's all generally good and I'm satisfied with the care I get." A relative commented, "My recommendation would be, try the service and I'm confident you will get a good care service."

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

- The registered manager had systems which effectively monitored the service. Regular audits and checks were completed. Internal practices were embedded to check on staff performance and management systems.
- A detailed business continuity plan had been developed to ensure staff were aware of actions they needed to take in the event of an emergency situation arising.
- The registered manager and staff team demonstrated an open and honest culture had been adopted by the service. One person told us, "The carers carry out all the required tasks for me and always check if there's anything else they can do before they leave. I think the service is managed well and the carers always update their notes before they leave."

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

- The registered manager had displayed a wide range of information at the agency office and it was clear strong links had been developed with families, the local community, as well as health and social care professionals.
- A service users' guide and statement of purpose outlined the visions and values of the service, as well as the facilities available.
- Those we spoke with provided very positive feedback about the service, the managers and staff team. Surveys had been conducted by relatives and staff members and action plans had subsequently been developed.

Continuous learning and improving care

- The provider had systems to ensure the staff team were continuously learning to consistently improve the care provided. A wide range of updated policies and procedures were available for the staff team.
- The staff team were provided with a wide range of guidance in the staff handbook, which was supplied at the time of employment.
- People were encouraged to make suggestions about possible improvements or to comment on current good practices. Team meetings took place within each house and action plans had been developed.

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 provider had systems in place, which supported the staff and management team to be open and honest when things went wrong.
- Systems adopted by the service showed accidents, incidents and safeguarding events were managed in an open and honest way, so everyone involved was kept up to date with progress and the staff team learnt lessons from situations where things went wrong. This supported the duty of candour standards.
- Everyone was co-operative throughout the inspection process. They demonstrated good knowledge of the service and the needs of those who used Preston Domiciliary Service. During the inspection information was provided promptly when requested and managers were open and honest.