

Adelphi Care Services Ltd

Domiciliary Services Adelphi Care Services Limited

Inspection report

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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:

Domiciliary Services, Adelphi Care Services Limited operates a supported living service and outreach provision to adults. The registered provider specialises in delivering care to people with learning disabilities and people on the autistic spectrum.

A supported living service enables people with a learning disability to live in their own home and the outreach provision is a service which supports people to access their local community with support from staff. At the time of the inspection four people were receiving support.

People's experience of using this service:

People were protected from harm and avoidable abuse; staff were familiar with safeguarding procedures and knew how to report any concerns as and when they presented.

People's level of risk was assessed from the outset. Support measures were put in place and the level of risk was monitored and assessed.

Safe medication practices were in place; people received support with their medication from staff who were trained and had their competency levels checked.

Staffing levels were safely managed. Staff told us that continuity of care was provided and people received support from staff who were familiar with their support needs.

Safe recruitment practices were in place. All staff who were employed had been appropriately vetted and the necessary pre-employment checks had been carried out.

The registered provider complied with the principles of the Mental Capacity Act, 2005. Staff understood and respected people's right to make their own decisions and where possible, encouraged people to make decisions about the care they received.

Care records contained person-centred information. Staff were able to develop a good understanding of people's likes, wishes and preferences.

People and relatives told us that staff provided care that was kind, sincere and compassionate. One relative said, "The staff are brilliant."

People were actively encouraged to engage in hobbies and interests that they enjoyed. Staff supported people to access the local community, participate in voluntary work and community events.

People received a 'service user' guide from the outset. This was provided in an 'easy read' format and

contained important information about the quality and safety of care people could expect to receive.

The registered provider had a complaints process and policy in place. People were provided with the complaint information and the registered manager maintained a good level of oversight in relation to the complaints that were submitted and if any lessons could be learnt.

The quality and safety of the care was continuously monitored and assessed. The registered manager had a number of different processes and systems in place to ensure people were receiving high-quality, person centred care.

We received positive feedback from people, staff and relatives about the provision of care that was delivered and the positive difference Domiciliary Services Adelphi Care Services had on people's lives.

People were encouraged to share their thoughts, views and suggestions about the quality and safety of care being provided. We saw evidence of improvements and developments that had been made based on feedback people had provided.

Rating at last inspection: At the last inspection service was rated 'Good' (report published June 2016). At this inspection we found that the registered provider continued to provide a good provision of care. The evidence we reviewed and feedback we received continued to support the rating of 'good'; there was no evidence or information from our inspection or ongoing monitoring that demonstrated serious risks or concerns.

Why we inspected: This was a planned, announced inspection to confirm that the service remained 'good'.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service remained safe

Details are in our Safe findings below.

Good ●

Is the service effective?

The service remained effective

Details are in our Effective findings below.

Good ●

Is the service caring?

The service remained caring.

Details are in our Caring findings below.

Good ●

Is the service responsive?

The service remained responsive

Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service remained well-led.

Details are in our Well-led findings below.

Good ●

Domiciliary Services Adelphi Care Services 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 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was completed by one Adult Social Care inspector.

Service and service type:

Domiciliary Services Adelphi Care Services Limited is a domiciliary care service. The service operates a supported living service and outreach provision to adults with complex care needs and learning difficulties. The service had a manager registered with The Care Quality Commission (CQC). This means that they and the registered 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 visit. This was because it is a small service and the registered manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in the office when we visited.

What we did:

Before our inspection we looked at information we held about the service. The registered provider had completed a Provider Information Return form (PIR). A PIR is a form we ask registered providers to submit annually detailing what the service does well and what improvements they plan to make. We reviewed information stored on our database, such as notifications that the registered manager is required, by law, to

submit to us as and when incidents had occurred. We also spoke to the Local authority and commissioning team to gain feedback about the service. We used all this information to formulate a planning tool; this helped us to identify key areas we needed to focus on during the inspection.

The inspection took place on 18 March 2019.

During the inspection we spoke with the registered manager, one deputy manager and six members of staff. We also spoke with two people receiving support and one relative who agreed to provide feedback about the quality and safety of care their loved one received. We also checked four care records of people in receipt of support, recruitment records of four members of staff and other records relating to the overall management and quality monitoring of the service.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Assessing risk, safety monitoring and management

- People's level of risk was appropriately assessed from the outset. Support measures were identified and put in place; these helped to reduce the level of risk and kept people as safe as possible.
- People's support needs and risk assessments were regularly assessed and reviewed. Staff were provided with up to date, relevant and consistent information.
- People had risk assessments in place that were tailored around their support needs. For instance, we saw risk assessments for challenging behaviour, disruptive behaviour, eating, environmental, road awareness and household tasks.
- The registered manager explained that the management of risk was "on-going" and "something that was monitored daily."
- One person told us "Oh yes, I'm safe". One relative said, "The staff are brilliant, I've got peace of mind."

Systems and processes

- Systems and processes were effectively in place to ensure people were protected from harm and abuse.
- Staff explained their understanding of safeguarding and whistleblowing procedures and the importance of 'reporting' and 'recording' their concerns.
- Safeguarding training was provided and there was an up to date safeguarding and whistleblowing policy in place.
- The registered manager maintained a good level of oversight in relation to any safeguarding incidents that occurred. The importance of safeguarding vulnerable adults was also discussed with staff during one to one supervisions.

Using medicines safely

- Medication management procedures were safely in place.
- Staff received the appropriate medication administration training and regularly had their competency levels assessed.
- There was an up to date medication policy and staff understood the importance of complying with medication administration procedures.
- Care records contained important information in relation to the support people needed in relation to their medication.
- Weekly Medication audits were completed to ensure medication compliance was maintained.

Staffing and recruitment

- Staffing levels were appropriately managed and people received continuity of care from staff who were familiar with their support needs. One staff member told us, "I've been supporting [person] for nine years so I know [them] really well."

- Staff told us that the management team prepared staff rotas in advance and people received the required level of care and support by experienced members of staff.
- Recruitment procedures were safely in place. All employees were appropriately vetted.

Learning lessons when things go wrong

- There was an 'accident and incident' reporting procedure in place.
- Staff explained their understanding of the reporting procedure and why this needed to be complied with as a measure of keeping people safe.
- The registered manager effectively 'tracked' all accidents and incidents as a measure of establishing emerging trends and reducing the level of risk that people were exposed to.

Preventing and controlling infection

- Staff demonstrated a good knowledge of infection control procedures. Staff were provided with personal protective equipment (PPE) as a way of managing and controlling infection.
- There was an up to date health and safety policy which contained relevant information in relation to infection control support measures.

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

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; supporting people to live healthier lives, access healthcare services and support.

- People's support needs and choices were established from the outset.
- The registered manager ensured that people's level of need could be accommodated and the correct level of support could be provided by the staff team.
- People received a holistic level of care and support from a range of different healthcare professionals.
- We saw evidence of support being provided from psychologists, consultants, GP's and social workers.
- Relevant guidance and best practice was incorporated within people's care records and staff were familiar with the support that people required.

Staff skills, knowledge and experience

- We received positive feedback about the skills and experience of staff. Comments included, "They [staff] know [person] really well." [Person] has come on so much, they've made such a positive difference."
- Staff were supported through an 'induction' period before providing any one to one support.
- Staff received training, learning and development opportunities as well as receiving regular supervision.
- Staff explained they received mandatory training but also 'bespoke' training as and when it was required.
- Staff who did not have the relevant qualifications were supported to complete 'The Care Certificate'; this is an agreed set of standards that staff within the health and social care sector are expected to complete.
- The deputy manager told us, "We implement as much as training as people need, there is specific training based on need." Staff members told us, "There is on-line, face to face and NVQ's offered" and "It's well organised, there's lots of training."

Supporting people to eat and drink enough with choice in a balanced diet

- Care records indicated that people received an effective level of support in relation to their nutrition and hydration support needs. One care record stated, "Support [person] to eat healthy, reduce the consumption of sugary food and drink."
- Staff were familiar with people's specialist dietary requirements that needed to be followed. A staff member explained that one person couldn't eat a particular style of food due to a specific medical condition.

Staff working with other agencies to provide consistent, effective, timely care

- Staff provided a consistent level of care that was tailored around each person's support needs and wishes.
- People attended 'health check' appointments and received an effective level of care in relation to their specific support needs.

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 make 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 with appropriate legal authority. Applications to deprive people of their liberty in community services must be made to the Court of Protection. We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- The registered provider was complying with the principles of the MCA, 2005.

- People's consent to care and treatment was obtained; care records indicated that people were involved in decisions that needed to be made in relation to the support they required.

- Staff had received MCA training and were familiar with the principles that needed to be followed.

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

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality diversity

- Staff provided care and support that was kind, compassionate and dignified.
- During the site visit (at the registered address) we witnessed positive interactions between staff and people who were being supported.
- Staff explained that all support needs were established from the outset and people received care and support that was tailored to their needs and person-centred.
- People's protected characteristics (such as age, gender, sexuality, cultural support needs) were assessed and measures were put in place to ensure people were treated fairly and equally.

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

- People were assisted and supported to make decisions about the care and support they required.
- People participated in the reviews that took place as well as being encouraged to complete 'my opinion surveys' about the quality and safety they received.
- Where people were unable to verbally communicate their decisions, other communication support aids were used. For instance, Makaton techniques were used to provide people with different means of communication.

Respecting and promoting people's privacy, dignity and independence

- Staff provided dignified and respectful care to people they supported.
- When we asked staff their understanding of 'dignity and respect' they said, "It's about treating them [people] with highest quality of care so they can live their best life" and "It's about them and how they would like to be supported."
- Staff supported people to remain as independent as possible. Staff supported people to access the local community and engage in activities and hobbies they enjoyed. For instance, one person enjoyed accessing the local shops and going to the pub.
- Confidential information was securely stored at the registered address and protected in line with General Data Protection Regulations (GDPR). People's sensitive information was not unnecessarily shared with others.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the services met people's needs

People's needs were met through good organisation and delivery.

Personalised care

- People received care and support that was high-quality, person-centred and tailored around their needs.
- Care records contained person-centred information that enabled staff to provide care and support that was in line with people's likes, preferences and wishes. One relative told us, "They [staff] know [person] so well."
- Care records contained specific information such as, '[Person] likes blue and black clothes', '[Person] enjoys watching television, especially BBC News' and '[Person] likes to sit in the front seat of the car when going out.'
- Staff supported people to remain as independent as possible. Weekly activities were arranged and people were encouraged to actively participate in hobbies and interests they enjoyed. One relative told us, "They [staff] take [person] out, they do a lot with [person]."
- The Accessible Information Standards (AIS) was being complied with. These standards were introduced by the government in 2016; ensuring that people with a disability or sensory loss were provided with information in a way they could understand. Information was provided in 'easy read' and different formats upon request.

Improving care quality in response to complaints or concerns

- The registered provider had an up to date complaints policy in place.
- People received a copy of the complaints process from the outset; people told us they would feel confident raising any issues with carers and management.
- One relative said, "If I had any concerns I would feel confident raising these but at the minute everything is absolutely fine."
- At the time of the inspection, no complaints were being responded to. Previously submitted complaints had been responded to and managed in line with organisational policy.

End of life care and support

- At the time of the inspection, nobody was being supported with 'End of Life Care'. However, the registered manager confirmed that all staff had access to 'End of Life Care' training.

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.

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high quality care and support; how the registered provider understands and acts on duty of candour responsibilities.

- Management and staff were committed to delivering care and support that was tailored around the care needs of the people they supported.
- People received high-quality, person-centred care. One relative told us, "They [staff] have done a wonderful job with [person], it's brilliant."
- Staff and relatives told us that the registered manager was committed to providing high-quality care which led to positive outcomes for people. One relative said, "[Person] is like a different person, the staff support [person] so well, [person] is getting the support but has independence too."
- Care and support was delivered in an open and transparent manner. Positive relationships had developed between Domiciliary Services Adelphi Care Services Limited staff, people receiving care and their relatives.

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

- The service was well-run and the registered manager and deputy manager maintained a good level of oversight in relation to the provision of care people received.
- The registered manager and staff understood the importance of delivering high-quality, person-centred care where risk was well managed and monitored.
- Effective quality assurance systems and processes were in place. Quality assurance systems ensured that the provision of care was monitored, assessed and improved upon where and when necessary.
- Regular audits and checks were routinely carried out. These helped to maintain high-quality, person-centred care that people received.
- Regular team, senior and locality meetings were taking place. Such meetings encouraged staff to discuss different aspects of service delivery and areas of improvement that needed to be focused on.
- The registered manager was aware of their regulatory responsibilities; they demonstrated their understanding of the Health and Social Care Act, 2008 and the importance of submitting statutory notifications to CQC.
- The registered provider had a variety of up to date policies and procedures in place. Staff explained the importance of complying with different policies and where they could be accessed.

Continuous learning and improving care

- The registered manager was committed to 'continuous learning' and improving the quality of care people received.
- The registered manager maintained a good level of oversight in relation to 'accident and incidents,

safeguarding and complaints.

- We saw evidence of action plans, 'trend' analysis and competency assessments being conducted.
- A quality assurance monitoring visit was conducted by Local Authority; all recommendations and follow up actions had been completed at the time of the inspection.
- Action plans were developed every three months as a measure of identifying areas of focus and making positive improvements for the benefit of people receiving support.

Engaging and involving people using the service, the public and staff

- People were encouraged to share their views, thoughts and suggestions about the quality and safety of care people received.
- We saw evidence of different meetings that people could attend as a measure of having their 'voices' heard.
- People were encouraged to complete quality questionnaires to identify areas of strength but also areas of improvement that were required.
- Completed questionnaires indicated that people were happy with the support they received, they felt safe and enjoyed the different level of activities they were engaged in.
- We received positive feedback about the registered manager during the inspection. Comments we received included, "[Manager] is approachable, we get on well", "It's the best job I've ever had" and "[Manager] is very supportive and approachable."

Working in partnership with others

- Domiciliary Services Adelphi Care Services continued to work in partnership with people, relatives and health-care professionals to provide a holistic level of support and overall good quality of life.