

Dial4Care Recruitment Ltd

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Inspection report

First Floor, 5 Grove Place
Bedford
MK40 3JJ

Tel: 01234261366

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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:

Dial4Care Recruitment Ltd is a domiciliary care agency. It provides personal care to people living in their own houses and flats in the community. Not everyone using a domiciliary care agency receives regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

The service also provides care and support to people living in two 'supported living' settings, so that they can live in their own home 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 supports adults and children. At the time of the inspection, they were supporting five young people, of ages 16-18 years.

People's experience of using this service:

- Staff had been trained on how to protect people from harm, and they knew how to report concerns.
- Potential risks to people's health and wellbeing were assessed and minimised.
- There were enough staff to meet people's needs safely.
- People's medicines were managed safely.
- Staff followed effective processes to prevent the spread of infection.
- Staff had been trained and had the right skills to meet people's needs effectively.
- Staff were well supported and had information they needed to meet people's assessed needs.
- Staff supported people to have enough to eat and drink.
- Staff supported people to access healthcare services when required, to help maintain their health and well-being.
- People were supported to have maximum choice and control of their lives, and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.
- People were fully involved in making decisions about their care and support.
- People were involved in the planning and reviewing of their care plans.
- People told us staff were caring and friendly.
- Staff respected and promoted people's privacy, dignity and independence.
- Information in people's care plans supported staff to deliver person-centred care that met people's needs.
- The registered manager sought feedback from people about the quality of the service provided.
- The registered manager worked in partnership with other professionals to ensure people received care that met their needs.
- There was a system to ensure people's suggestions and complaints were recorded, investigated, and

acted upon to reduce the risk of recurrence.

- Audits and quality monitoring checks were carried out regularly to continually improve the service.

Rating at last inspection:

- This was the first inspection following the provider registering with the Care Quality Commission on 2 February 2018.

Why we inspected:

- This was a planned inspection following registration with the Care Quality Commission.

Follow up:

- We will continue to monitor all information we receive about the service and schedule the next inspection accordingly.

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.

Dial4Care Recruitment 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

One inspector carried out the inspection.

Service and service type:

Dial4Care Recruitment Ltd is a domiciliary care agency. It provides care to people living in their own houses, flats or specialist housing. The service provides personal care and support to adults and children.

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 site visit because it is small and the manager is often out of the office supporting staff or providing care. We needed to be sure they would be in to support the inspection.

Inspection activity started on 6 February 2019 and ended on 8 February 2019 when we received information we asked the provider to send us. We visited the office location on 6 February 2019 to see the manager and care staff; and to review care records and policies and procedures. We also visited people in their homes to speak with them about their care.

What we did:

Before the inspection, we looked at information we held about the service including notifications. A notification is information about events that registered persons are required to tell us about. We checked the Provider Information Return (PIR). This is a form that asks the provider to give some key information

about the service, what the service does well and improvements they plan to make. We used this information to plan the inspection

During the inspection, we looked at various information including:

- Care records for three people.
- Records of accidents and incidents; compliments and complaints; audits; surveys.
- Three staff files to check the provider's staff recruitment, training and supervision processes.
- Some of the provider's policies and procedures.
- We spoke with three people using the service, two staff and the registered manager.

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.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe with how staff supported them. One person said, "I'm happy and safe." Another person said, "I feel safe and I've never been worried about anything."
- Staff knew how to keep people safe because they had been trained on this. They demonstrated to us they knew how to report concerns in line with the provider's safeguarding process.
- One staff member told us, "I've done safeguarding training and I know the [young people] are safe." They further told us about different agencies they could report concerns to.

Assessing risk, safety monitoring and management

- There was a system staff followed to manage potential risks to people's health and wellbeing well. Risks had been assessed so that people had appropriate risk assessments to guide them and staff on how to minimise risks.
- One staff member said, "We have processes to make sure the [young people] are safe, particularly when they are out. They have mobile phones to call staff if they need support."
- Staff regularly completed health and safety checks to assess if people's homes had any hazards that could put them, their visitors and staff at risk of harm. Appropriate action was taken make improvements if required.

Staffing and recruitment

- There were safe staff recruitment processes to make sure staff employed by the service were suitable. The registered manager had completed all necessary checks.
- There were enough staff to support people safely. Staff we spoke with confirmed this.
- People had not experienced any missed or late care visits because staff were based at the premises where people lived.

Using medicines safely

- Staff were currently supporting one person with occasional (as required) pain relief medicine. They completed an electronic medicines administration record (MAR) to check that the person took their medicine as prescribed by their doctor.
- The provider had systems necessary for them to manage medicines safely. This included appropriate storage facilities and guidance for staff.

Preventing and controlling infection

- Staff told us, and records showed they had been trained in infection prevention and control, and how to handle food safely. They also had supplies of protective equipment, such as gloves if required when

supporting people.

- Staff also supported people to keep their homes clean and comfortable for them.

Learning lessons when things go wrong

- There had yet been no incidents or accidents reported at the service. However, the provider had systems to ensure these could be managed effectively.
- Staff knew they needed to inform the registered manager of any incidents that occurred so that action could be taken to reduce the risk of recurrence.

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; Adapting service, design, decoration to meet people's needs

- The service was meeting people's needs effectively. People confirmed this, including one person who said, "They are really good at what they are doing. My care was well put together."
- There were systems to continually assess people's care and support needs to ensure they received effective care.
- People had care plans that showed how their needs, choices and preferences would be met by staff. These were updated when necessary. At the time of the inspection, the registered manager was still updating the care plans of a person who was new to the service.

Staff support: induction, training, skills and experience

- Staff were supported to acquire knowledge and skills necessary for them to support people effectively.
- Staff told us of the induction and training they had completed. One staff member said, "I've done all the training I need to do and I'm up to date. We can do other training if we need to."
- Staff told us they were supported in their work, including by receiving regular supervision. One staff member said, "We get supervision with the manager on a monthly basis. It is quite useful and supportive to staff."

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

- Not everyone needed support with their food and drinks. Some people could do this independently, while others needed staff to supervise them to ensure they prepared their meals safely and they ate well.
- One person said, "I'm fairly independent in preparing my own food." While another person said, "I get good and different food, and I like it. I cook almost every day with my friend and staff."

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

- Where required, staff supported people to attend appointments with various health professionals such as GPs.
- Some people were also receiving regular support or treatment provided by specialist health professionals. A professional was visiting one of the people using the service on the day of our visit.
- The registered manager told us of some of the professionals they worked closely with to ensure people received effective care. This included social workers.

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 with appropriate legal authority.
- We checked whether the service was working within the principles of the MCA and found these were met.
- Everyone using the service had capacity to make decisions and they had given consent to their care and support. People we spoke with confirmed this.

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 and diversity

- People told us staff were kind, caring and friendly. One person said, "All staff are nice." Another person said, "We have very nice staff."
- People told us they got on well with the other people they shared their home with. One person said, "All the guys are good. They help me with my college assignments and homework."
- People told us staff respected their individuality, diverse needs and preferences. Some people's cultural diversity meant they preferred certain foods, which staff helped them to get.

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

- People told us they were supported to make decisions and choices about how they wanted to live their lives and to be supported by staff.
- Care plans had been developed together with people and where required, with other professionals. This was to ensure people's wishes were always considered.
- Some people did not have English as their first language, so they were not always able to understand information given to them quickly. The registered manager told us they used translators when necessary to ensure people fully understood information given to them so that they could make informed choices. People also had professionals who acted on their behalf to help them make complex decisions.

Respecting and promoting people's privacy, dignity and independence

- People told us that staff supported them in a respectful manner, and they promoted their privacy and dignity. One person said, "The staff are always lovely. I have no problems."
- People told us they were independent in carrying out most of their activities of daily living, but they needed staff support to do some things like cooking and ensuring they ate nutritious food. Staff also supported people with their educational activities. One person told us they valued this support as they would otherwise struggle with their college assignments.

Is the service responsive?

Our findings

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

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

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People's care and support needs were being met by the service in a personalised way.
- People said their care plans reflected their care needs and preferences. One person told us they did not need much practical support, but they needed support to work through issues they might be worried about. They said, "I like talking to staff about how I'm feeling and this helps me."
- Another person said, "It's all okay, I'm supported well."
- The registered manager told us they regularly reviewed people's care and support plans to ensure these continued to meet people's current needs.
- One staff member said, "We achieve good care standards here and we make sure the [young people] get the support they want and need." Another staff member said, "[Young people] are each assigned a key worker who makes sure they receive holistic support with their personal care, social care, health and education."

Improving care quality in response to complaints or concerns

- The provider had a system to manage people's concerns and complaints.
- People told us they were happy with how their care was managed and had not complained about how staff supported them. The provider had dealt with complaints about how people lived together at their shared home. There were 'house rules' agreed with people to help them live well together.
- One staff member said, "Everything mainly works well, but we always look at how we can do things better and different for the [young people]."

End of life care and support

- No one supported by the service required end of life care and therefore, the registered manager had not added this information in people's care plans.
- We discussed with the registered manager that they needed this information for everyone they supported so that staff knew how people wanted to be supported at the end of their lives. They told us they would speak with people to check if they wanted to include this information in their care plans. During the discussion with the registered manager, we recognised that as young people, they might not want to talk about this yet.

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; and how the provider understands and acts on duty of candour responsibility; Continuous learning and improving care

- The registered manager, the deputy manager and staff carried out regular audits. This meant they could regularly identify areas of the service that required improvement, and make those improvements in a timely way.
- There had been checks of people's care records and staff records to ensure these contained up to date and relevant information. Safety checks of the premises were also completed regularly so that people were safe within their homes.
- One staff member said, "The service is well planned. The staff here try their best to support the [young people] the best we can. Resources are available when needed to improve what we do. We are very much focused on helping the [young people] to have independent living skills."
- The registered manager appropriately reported any issues or incidents to relevant agencies involved with the service.

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

- Staff told us they enjoyed their job and they found the service good. They also told us they worked well as a team to ensure they provided safe, effective and good quality care. One staff member said, "Better communication amongst all of us helps to improve the service."
- Staff said the registered manager provided appropriate support for them to carry out their roles well and they knew the standards expected of them. One staff member said, "There is very good support for staff here."
- The registered manager spent most of their time at the schemes to assess staff's competency, provide supervision and monitor the standards of care. They were supported by the deputy manager in this.

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

- People and staff had regular meetings to discuss any issues that might arise from time to time. There were always members of staff based at the schemes, and people could speak with them anytime they had concerns.
- The registered manager told us they always checked if people had any concerns, requests or other feedback when they visited the schemes. This enabled them to deal promptly with people's concerns.
- The registered manager had a service development plan which included suggestions made by people and staff. Staff felt valued and able to contribute to the development of the service. One staff member said, "We

are helping the service grow and we are hoping to achieve more in the future."

Working in partnership with others

- The service worked in partnership with health and social care professionals who were involved in people's care. This ensured everyone could check that people consistently received the support they required and expected.
- The commissioners of the service also monitored the service to ensure they met the standards and provided good care to people. The registered manager told us their last review in October 2018 was positive.