

Delight Supported Living Ltd

# Delight Supported Living Ltd

## 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

Delight Supported Living Ltd, provides personal care and support to people living in their own homes in the Morecambe area. At the time of inspection there were 70 people receiving a service. 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 supported to be safe. Comments included; 'I feel completely safe with everyone, they're very kind and respectful of me and my home' and ' They always make sure I have everything I need before they leave'.

There were enough staff to meet people's needs safely and without rushing. Staff had received training appropriate to their role which helped ensure they could support people effectively. Staff confirmed they had enough time to support people safely.

People had been involved in developing their care plans, care records included clear information about their needs and wishes. People's cultural needs and preferences had been included.

Staff helped ensure people were kept safe from the risk of infection and COVID-19.

The majority of people we spoke with praised the management of the service and found them approachable and responsive. Where people had concerns they felt they could raise these directly.

Staff, praised the management team and felt fully supported in their roles.

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.

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

### Rating at last inspection

The last rating for this service was Good. (Published 16 January 2020)

### Why we inspected

We undertook this focused inspection as part of a random selection of services which have had a recent Direct Monitoring Approach (DMA) assessment where no further action was needed to seek assurance about this decision and to identify learning about the DMA process.

## 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.

# Delight Supported Living 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 Health and Social Care Act 2008.

#### Inspection team

The inspection was completed by one inspector and an Expert by Experience. 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 their own homes.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

#### Notice of the inspection

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 4 May 2022 and ended on 5 May 2022. We visited the location's office 4 May 2022.

### 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 and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection. We used information gathered as part of monitoring activity that took place on 1 March 2022 to help plan the inspection and inform our judgements.

### During the inspection

We met with the registered manager. We reviewed a range of records including; care records, visit lists, recruitment records, medicine records, policies and procedures and records relating to governance and auditing. We spoke with five people supported by the service and the relatives of two people. We consulted with five members of staff using questionnaires.

### 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.

# 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

- The provider's policies helped ensure people were protected from the risk of abuse and avoidable harm.
- Staff had received training and were aware of what might be a safeguarding concern and, how to raise this with managers and other agencies.
- The registered manager ensured any safeguarding concerns were raised with the local authority and kept an up to date log of incidents.

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

- The provider ensured people were supported to manage the risks in their daily lives. Risks had been assessed and plans developed to minimise the potential for harm. This included in relation to; moving and handling, nutrition, skin integrity, medicines and infection prevention and control and COVID-19.
- Staff were confident there was enough information in care records to guide them to support people to remain safe. Staff communicated with senior staff regularly to update them where people's needs changed.
- People supported, and their relatives, had been involved in developing their care plans and risk assessments.
- Any incidents had been recorded fully to enable the provider to consider whether there were any lessons to be learned. We saw care plans had been updated in response to lessons learned, which helped ensure care improved.

Staffing and recruitment

- People were supported by staff who had been recruited safely. The provider's recruitment procedures were robust, records showed all necessary pre-employment checks had been completed. This helped ensure people were safe to work with vulnerable people.
- There were enough staff to support people safely. People supported and their relatives were confident staff stayed the right amount of time. The provider ensured people were informed if staff were delayed.
- One person supported said, 'I never worry that they won't turn up and know they will ring me if they are going to be late'. A staff member said, 'I feel I get enough time to complete my services to a high standard and have enough time to chat with clients.'

Using medicines safely

- The provider ensured staff had received training to support people, when required, with their medicines. Staff's competency had been checked regularly by the management team.
- People supported told us they were confident they received their medicines as prescribed.

### Preventing and controlling infection

- The provider ensured staff were trained in, and followed good infection prevention control (IPC) routines.
- Staff continued to follow high levels of IPC on visits, this included wearing full personal protective equipment, (PPE) including, gloves, masks and aprons.

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 MCA 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 Mental Capacity Act (MCA).

- We found the service was working within the principles of the MCA.
- People supported had consented to receive personal care.

# 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

- Staff told us they enjoyed working for Delight Supported Living and felt committed to supporting people. Staff said managers looked after them and they felt valued.
- The registered manager was positive and approachable. Effective communication with the team had been maintained which helped ensure people's care was maintained in ways that achieved good outcomes.
- The provider ensured the registered manager was supported in their role.
- People supported felt the managers responded to them. Comments included; 'I did have an issue once and (registered manager) dealt with it very professionally' and 'I always know (registered manager) would sort anything out if there were a problem'

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

- The registered manager had identified that some paperwork in relation to people's care had not always been maintained to the standard they expected. This related to the impact of COVID-19 on staffing and the lack of information sometimes provided by commissioners. We were assured risks had been properly identified and managed. Care records were up to date and reviewed regularly.
- The provider and registered manager were clear with staff about their expectations. Staff understood and were committed to providing high-quality care. One staff member said, 'I think Delight is well-led, management are great and always there for us.'
- The provider had an auditing system in place to ensure they checked the quality of care and care records. Any issues identified had been addressed and used to inform practice.
- Senior staff and the management team carried out regular spot checks during visits to identify what staff were doing well and what might be better.

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

- The provider had systems in place to consult with people who were supported, their relatives and staff.
- Staff told us communication was very good within the team and they felt able to raise anything at any time.

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 was open and transparent during the inspection and was able to demonstrate they understood their obligations in relation to the duty of candour.
- People supported said they had been kept up to date with issues which affected them.
- The registered manager had submitted notifications when required to the appropriate authorities including CQC and the local authority.

Continuous learning and improving care; Working in partnership with others

- The registered manager ensured they kept themselves informed about developments in practice. The registered manager was a member of professional organisations which provided advice and support.
- Staff were encouraged to keep up to date with regular emails and signposting from the registered manager to local authority and Skills for Care training and promotions.
- The registered manager had developed effective working relationships with partner organisations, this included commissioners and social care staff.