

Divine Healthcare Solutions Limited

Divine Healthcare Solutions - Main Office

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

Divine Healthcare is a domiciliary care agency providing personal care and support to people in their homes. At the time of the inspection, 23 people were using the service. CQC only inspects where people receive personal care. This relates to tasks related to personal hygiene and eating where people require this support; we also consider any wider social care provided.

Not everyone who used the service received personal care.

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

Risks to people's safety and well-being were assessed. Staff had information to enable them to support people safely. Care plans were detailed with people's medical conditions, and all staff had completed training to enable them to support people safely.

People were supported with maximum choice and control of their lives, and staff supported them in the least restrictive way possible and their best interest. The policies and systems in the service supported this practice.

The provider's recruitment policy was followed, and recruitment practices were safe. All staff had completed training and had a probation period to ensure suitability. This meant the provider ensured only suitable staff were employed.

Staff were knowledgeable about infection prevention and control. Personal protective equipment was available.

People were supported with their medicines following a risk assessment; this meant people were supported safely.

People and their relatives were given the opportunity to be involved in the assessment process to ensure that people's views and preferences were included in their care.

People were satisfied with the care support they received and told us they had no complaints.

Staff supported people in preparing meals and eating and drinking.

People received support in keeping with the principles of the Mental Capacity Act 2005 (MCA).

People were able to express any concerns they had, and management ensured that action was taken.

People's privacy and dignity were respected, and people felt able to express their views.

The provider had procedures to monitor and improve the service, including managing incidents, accidents, safeguarding alerts and complaints.

For more details, please see the full report, which is on the CQC website at www.cqc.org.uk

Rating at the last inspection

This service was registered with us on 24 November 2021, and this is their first inspection.

Why we inspected.

This inspection was prompted by a review of the information we hold about the service.

Follow up.

We will continue to monitor the information we received about the service, which will help inform when we next inspect.

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 was safe
Details are in safe findings below

Good ●

Is the service effective?

The service was effective
Details are in effective findings below

Good ●

Is the service caring?

The service was caring
Details are in caring findings below

Good ●

Is the service responsive?

The service was responsive
Details are in our responsive findings below

Good ●

Is the service well-led?

The service was well led
Details are in our well led findings below

Good ●

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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 Health and Social care act 2008.

Inspection team

The inspection team consisted of 1 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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and for compliance with regulations.

At the time of the inspection, there were 2 registered manager managers in post.

Notice of inspection

This inspection was announced. We gave the service 48 hours' notice of the inspection. This was because it was a small service, and we needed to be sure that the provider or registered manager would be available to support the inspection.

Inspection activity started on 29 March 2023 and ended on 27 April 2023.

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 did not ask the provider for a PIR (provider information return). A PIR gives the provider opportunity to tell us about the service, what the provider does well, and what improvements are required.

During the inspection

We reviewed a range of records. This included 5 people's care records to see how their care and treatment were delivered. Other records included four recruitment files to check that suitable staff members were recruited and received suitable training. We also looked at records relating to the management of the service. We obtained the views of people using the service and their relatives. We spoke with three staff, five relatives, and both registered managers.

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 of this newly registered service. This key question has been rated good This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks to people's safety and well-being were assessed and monitored. Risk assessments were in place detailing how to respond to people's health conditions.
- Care plans were reviewed so staff had information to help keep people safe. One person using the service told us, "I am so happy with the staff that come, and the office is really good as well; they do a great job."
- The registered managers told us that care planning included consideration of equality, diversity, and human rights (EDHR) because it is person-centred.
- People using the service told us they were involved with their care.
- The registered managers told us, "We give people a chance to make an informed choice."
- Staff told us that they had completed training in relation to people's medical conditions. One staff member said, "I have had training in areas that I need so I can look after people safely."

Systems and processes to safeguard people from the risk of abuse.

- The provider had systems to safeguard people from the risk of abuse. This included a safeguarding policy and a whistle-blowing policy.
- Staff were aware of this policy. Staff were encouraged to use this procedure if they had any concerns.
- Staff told us they could speak with the management team if needed, and action would be taken.
- The registered managers told us, "We encourage staff to speak out if they have concerns. We do sporadic phone calls to staff to find out how they are doing and whether they have any concerns. Relatives we spoke with felt that their relatives were safe with staff. One relative told us, "They [staff] do a really good job, and that puts my mind at rest."
- People we spoke with gave positive feedback about the staff who supported them and felt they could report any concerns to management and action would be taken.

Using medicines safely

- People received their medicines as prescribed by staff trained in safely administering medicines.
- All staff told us they have medicines training, and this is updated when needed.
- A relative told us, "The staff make sure [named person] takes their medication as she cannot remember taking it".

Staffing and recruitment

- There were enough staff to meet people's needs. One staff member told us, "We have enough time between calls to support people. There is a team of us who work together."
- People using the service received support from the same staff to provide consistency of care.
- Staff recruitment checks included references, identity checks and confirmation that disclosure and barring

service (DBS) checks had been completed. Disclosures and barring service checks allow providers to obtain information, including details about convictions and cautions, on the Police National Computer.

- The registered managers told us, "There are 10 stages of the recruitment and selection process. The last 4 make up the selection process. The first 6 stages are the recruitment process. Once completed, staff are then appointed to complete an induction."

Preventing and controlling infection

- The service had effective preventative and control measures to keep people safe from infection.
- Staff used personal protective equipment (PPE) effectively and safely when appropriate. The service infection prevention and control policy included a process for staff to follow. People told us that staff wore aprons and gloves when they supported them.

Learning lessons when things go wrong.

- The registered managers had systems for learning when things went wrong. The managers investigated concerns raised by staff. Managers shared learning with the staff.
- The registered manager told us, "Any concerns from staff or people using the service are used to learn from. The staff we spoke with knew the procedure to take if an incident occurred. All staff told us they would report to the office if they had any concerns."

Is the service effective?

Our findings

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 the best available evidence.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and feedback confirmed this.

Assessing people's needs and choices, delivering care in line with standards, guidance, and the law.

- People and their relatives told us they participated in the assessment process with the provider to enable the person to contribute to how their care was provided. People assessed care needs based on their medicinal condition, preferences, risks, and choice.
- People and their relatives gave positive feedback about the care provided. One relative told us, "I have no worries at all; the staff are very kind and ensure all my relative's care needs are met." One person using the service told us, "I am happy they are lovely staff nothing is too much trouble for them."

Staff support: induction, training, skills, and experience

- Staff were supported through an induction which included training and supervision. Staff also told us they had a period of shadowing experienced staff when they started working with the service.
- Staff told us they had received appropriate training and supervision to support people safely.
- Relatives and people using the service told us they felt the staff had the skills to support them. One relative told us, "We have had other agencies before; we are happy with this one."

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

- People were supported to have a balanced diet. The staff ensured people had enough to eat and drink. The manager completed a needs assessment in relation to the dietary and nutritional support people needed. One member of staff told us, "I always ask people what they want."

Staff working with other agencies to provide consistent, effective, timely care, supporting people to live healthy lives and access healthcare services and support.

- The registered manager told us they work with district nurses', occupational therapists, dietitians and other healthcare professionals when required.
- People's healthcare needs were recorded and risk assessed to ensure that staff had the information to support people and meet their 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 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 the mental capacity to take 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. People's capacity to make decisions was assessed and recorded.

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 of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Ensuring people are well treated and supported, respecting equality and diversity,

- People using the service and their relatives gave positive feedback on how they were treated and supported. One person told us, "I feel that I have some control because staff ask me what I want." Another person told us, "The staff are thoughtful, caring and pleasant."
- People's care plans had information about their backgrounds to help staff get to know the people they were supporting.
- One staff member told us, "I talk to people when supporting them and ask their permission before I do anything."
- Care records included people's cultural and religious needs as well as important things about them.
- All staff we spoke with understood the importance of treating people with kindness, dignity, and respect.
- Staff demonstrated a caring approach. For example, one staff member told us, it is important to make people feel safe."
- Staff told us they encourage people to voice their views about what they need and how they would like their care completed.
- The registered manager told us they encouraged people to choose what they wanted staff to do and be involved in decisions about their care as far as possible.
- Relatives told us the staff were kind and caring. One relative told us, "I don't have to worry now because the staff are great."

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

- People were involved in planning their care. Relatives supported some people.
- People we spoke with confirmed they were able to make decisions about their care.
- Staff told us they supported the people how they wanted and always asked if there was anything else they needed before they left; this was confirmed with the people we spoke with.

Respecting and promoting people's privacy, dignity, and independence

- One relative told us, "The staff treat [named person] respectfully. Another relative told us, "I feel my relative is well looked after. "
- The managers and staff demonstrated the importance of independence when supporting people. A relative told us, "My relative always tells me that the staff are good, and they always ask what my relative would like."
- Another relative told us, "They [Staff] make sure we have a say, and they treat my relative with respect."
- People and relatives told us that privacy and dignity were maintained. One relative told us, "The staff make

sure [named] person is covered, and curtains are closed before any personal care takes place".

Is the service responsive?

Our findings

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were consistently met through good organisation and delivery.

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

- People receive personalised care which met their needs and reflected their preferences.
- People and relatives were happy with the care they received. Care plans included information to enable staff to meet people's preferences and choices. People told us the staff knew them well.

Meeting people's communication needs

- Since 2016, all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The AIS tell organisations what they have to do to help ensure people with a disability or sensory loss receive information in a way they can understand. It also says that people should get the support they need in relation to communication.
- People's communication needs were assessed and documented in their care plans.

Improving care quality in response to complaints or concerns.

- People and their relatives had the information to raise concerns or complaints. The complaints policy was in place, and the registered manager followed it.
- We received positive feedback about the complaints process from people using the service and their relatives. One person told us, "I have raised some issues, and it was dealt with effectively and very quickly."

Planning personalised care to ensure people's choice and control and to meet their needs and preferences.

- Care plan contained detailed information to enable staff to support people safely. People's choices and preferences were included in their care records.

End-of-life care

- Staff supported people using the service who were coming to the end of their life.
- Staff worked with other healthcare professionals who were involved in supporting the person.

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 promoting an open, fair culture.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Managers were clear about their roles and understood and quality performance, risks, and regulatory requirements.

- The managers had systems in place to assess and monitor the safety and quality of the service.
- The registered demonstrated effective oversight of the service.
- Systems were in place to ensure safe care and treatment.
- Quality assurance work had taken place in relation to care plans and risk assessments.
- Care plans contained enough information to ensure safe care was provided by staff with the relevant training.
- The managers completed risk assessments to support staff.
- Routine medicine audits were completed to identify any areas of concern.

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

- People using the service and their relatives told us the managers were approachable. One person told us, "The managers are good when I have spoken with them; I am given the time to express any concerns or worries." Another person told us, "The managers are very nice and helpful."
- Staff spoke positively about the management of the service.
- The managers told us, "We send questionnaires to gather feedback. We visit the people using the service to gain their feedback."

How the registered managers understood and acted on their duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong.

- The registered managers were clear about their duty of candour and their legal responsibilities to be open and honest with people when something goes wrong. Statutory notifications were sent to us as legally required telling us about specific incidents. Records confirmed that information was shared at staff meetings when things had gone wrong, and changes were introduced when needed.

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

- People and relatives spoke positively about management's engagement with them. They explained that the registered managers contacted them by phone or by visiting. One person told us, "Both managers are good and listen to me."
- Staff felt involved in the service and were supported by managers who undertook spot checks and training.

- Managers held staff meetings One member of staff told us, "The service is good to staff. They support us."

Continuous learning and improving care.

- The managers had a clear vision for the direction of the organisation in terms of growth.
- Staff were trained, and information was shared with people using the service where needed.

Working in partnership with others

- Managers collaborated with health and social care professionals to deliver a well-led service.