

Desla Care Agency Ltd

# Worksop

## Inspection report

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Worksop  
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Date of inspection visit:  
30 August 2022

Date of publication:  
22 September 2022

### 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

Workshop is a domiciliary care agency providing personal care to people living in their own homes. Not everyone who uses domiciliary care services receive 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. At the time of inspection there were four people who received personal care support.

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

Assessments and care plans were completed prior to people receiving care. People's personalised needs and preferences were documented, and guidance was provided for staff on how people wished to be supported.

Staff were knowledgeable about safeguarding and knew how to protect people from harm and neglect. Staff were supported to access training that was specific to conditions people were living with.

People received support from a small team of consistent staff which included the registered manager. Processes were in place to support people with their medicines if required. Infection control measures were in place including staff use of personal protective equipment (PPE).

The registered manager had embedded a system of quality assurance checks to ensure good oversight of the running of the service. They worked in an open and transparent way. Policies and systems were in place to ensure any issues could be dealt with promptly.

The registered manager liaised with health and social care professionals to maintain people's health. People's capacity to make their own decisions was assessed. 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

This service was registered with us on 21 April 2021 and this is the first inspection.

### Why we inspected

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

### Follow up

We will continue to monitor information we receive 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?

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.

# Workshop

## 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

This inspection was carried out by one 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 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 inspection

We gave a short period 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 30 August 2022 and ended on 1 September 2022. We visited the location's office on 30 August 2022.

#### What we did before the inspection

We reviewed information we had received about the service since it had been registered with CQC. We sought feedback from the local authority and professionals who work with the service. The provider was not

asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

#### During the inspection

We spoke with two relatives of people who used the service about their experience, and we sought feedback from three care staff. Whilst at the office we spoke with one of the directors and the registered manager and reviewed records, including recruitment files, care records and quality assurance checks.

# 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.

Systems and processes to safeguard people from the risk of abuse

- People were consistently safe and protected from avoidable harm, neglect, abuse and discrimination.
- A relative told us their loved one felt safe and were confident in staff skills and abilities to ensure they remained safe living within their own homes. They said, "My [relative] is supported so well by staff, it gives them confidence to remain being independent."
- The provider understood their safeguarding responsibilities and duties. There was a safeguarding policy in place that was accessible to staff. Staff had received training and were knowledgeable about their responsibility.

Assessing risk, safety monitoring and management

- The provider took a proactive approach to anticipating and managing risks. Staff were well trained and understood their responsibilities.
- The provider ensured staff were provided with information on how to support people safely prior to delivering care.
- Risk assessments were monitored and reviewed on a monthly basis. This ensured any increasing risks were identified and acted on in a timely manner.

Staffing and recruitment

- Staff were recruited safely. The provider ensured they had enough staff to meet people's needs, they were actively recruiting to increase their capacity to allow them to be able to support more people.
- The provider ensured that staff were trained in line with conditions people were living with. For example, we saw advanced training and development in dementia care. This ensured people received care safely and consistently.
- Safe recruitment processes were in place. These included pre-employment checks such as Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Where people required support with their medicines, this was administered and managed safely.
- Staff had completed medicine training. They completed medicine records which were audited by the registered manager which identified any issues. This ensured people received their medicine as prescribed and on time.

### Preventing and controlling infection

- The provider ensured staff had access to personal protective equipment (PPE). Relatives told us they felt staff used PPE within their homes effectively and safely.
- Staff had received COVID-19 and hand hygiene training.
- We were assured that the provider was accessing testing for staff.
- We were assured that the provider's infection prevention and control policy was up to date. The provider also had an up to date COVID-19 policy and risk assessment in place.

### Learning lessons when things go wrong

- At the time of inspection, no incidents or accidents had occurred since the provider started to deliver packages of care. The registered manager was aware of their responsibilities and processes to follow. Staff were knowledgeable about how to deal with incidents if they arose.

# 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

- People's needs were assessed by the registered manager before care was agreed and delivered. This ensured people were supported by suitably trained and knowledgeable staff.
- Care was delivered in line with people's assessed needs and best practice. The registered manager advocated on people's behalf when necessary to ensure they received sufficient support.
- For example, one person had been assessed prior to referral to the provider as needing one call per day. The person told us, "After a week they [staff] knew I needed further help and were able to support me to get an evening call. I'm so grateful."

Staff support: induction, training, skills and experience

- Staff had the right competence, knowledge, qualifications, skills and experience to carry out their roles. Staff received regular supervisions and appraisals about performance as well as ongoing training and development.
- Staff received an induction which included shadowing another staff member to learn about people's care needs and safe care delivery. All staff completed the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- A staff member told us, "The provider encourages promotion from within, this means everyone has care experience and understands how to deliver good person centred care at every level."

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

- Where people received support from staff with meal preparation, care plans recorded information about this, including instructions for staff about tasks required during each visit and people's preferences.
- One person using the service told us, "Staff make all my meals for me, they know I enjoy cooking and encourage me to help whenever I am able to."

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

- The provider worked in partnership with other healthcare professionals.
- Care records detailed communication with social workers and district nurses. Care plans had been reviewed and amended in line with any recommendations.
- People told us they had been supported by the service to attend medical appointments. For example, visit times had been altered to accommodate appointments where possible.



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 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 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

- At the time of our inspection, the service did not support anyone who was deprived of their liberty.
- People's capacity was considered at initial assessment. Staff had a good knowledge of the principles and requirements of the MCA and supported people accordingly.

# 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 service ensured people were treated with dignity, respect and kindness.
- People were supported to lead their lives in their chosen way. The protected characteristics of the Equality Act 2010, such as age, sexual orientation and gender, were embraced rather than treated as barriers to people leading their lives in their preferred way.
- A Relative told us, "Staff are amazing, my [relative's] have been so much happier since they started coming, it's a pleasure to see."

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

- People were involved in decisions about their care and care preferences. The management team were in regular communication with people and their loved ones, to ensure people's views were considered for all aspects of their care.
- Staff told us how they encouraged people to make choices, for example choice of clothing or meals. A staff member said, "Helping someone know what the weather is like helps them make choices about clothing, small decisions mean a lot to people."

Respecting and promoting people's privacy, dignity and independence

- Staff provided care which was respectful of people's privacy and dignity. Feedback from people and their relatives confirmed this.
- Personal information was kept securely at the office location. Staff were aware of the importance of confidentiality and keeping information safe.
- The provider promoted care delivery that allowed people to be as independent as possible. Care plans contained guidance on how staff could support and encourage people to maintain and use their skills. This helped to ensure people were respected in their own homes and treated with dignity.

# 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.

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

- People's care needs were established by speaking in depth with them, or their family members, prior to care support being commenced. This enabled the provider to ensure they were able to plan and provide personalised care.
- People's relatives were able to feedback and handover information on people's daily notes, so staff were aware of any changes to people's care needs.
- Relatives told us they had been involved in their loved one's care planning. One relative said, "We have a regular carer which means they know [name] and get to know their routine and meet their needs without us having to worry."

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. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Communication needs were assessed prior to care commencing and were regularly reviewed as people's need changed.
- The registered manager advised, although it had not been required, information could be made available to people in a variety of formats, such as easy read or large print, as required.

Improving care quality in response to complaints or concerns

- Complaints policies and procedures were in place. Relatives told us they knew how to make a complaint and were confident to do so, if needed. At the time of inspection, no formal complaints had been received.

End of life care and support

- Although end of life care was not provided, the provider had relevant policies in place in case the situation did arise.
- Staff had received training and were knowledgeable about end of life 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.

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; Working in partnership with others

- The provider promoted a positive person-centred culture.
- A relative said, "I feel the management have matched my [relative's] needs for support very well with the carer that has been supporting them. They have said they feel safe when the carer is there and are happy to have them in their home."
- Staff told us they worked well together as a team and felt supported by the registered manager. Formal supervision sessions were planned so staff had the opportunity to discuss their roles, development and receive any support.
- The provider and staff team worked in partnership with other health and social care professionals. They provided examples of how they did this recently to ensure people had access to the support they needed, such as attending appointments at hospital or with GP's.

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; Continuous learning and improving care

- The registered manager was aware of their responsibility to keep people informed of actions taken following incidents in line with the duty of candour.
- Staff and relatives said the registered manager was open and approachable and contacted them frequently to obtain feedback.
- There were comprehensive quality assurance inspection reports completed by the registered manager that included competency checks. These were completed within the home with people and staff present. This encouraged transparency of information and care planning and highlighted changing needs.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Staff had a clear understanding of their roles and responsibilities. An electronic monitoring system was in place to ensure people received their calls on time and for the specified duration.
- Although no formal feedback had been requested by the service the registered manager told us that verbal feedback was sought monthly from people. Relatives we spoke with confirmed this.
- The registered manager had a thorough understanding of regulatory requirements. They ensured relevant agencies were notified immediately of any incidents. This minimised potential risk to people.
- A relative said, "Management have always responded quickly and efficiently to my questions and

requests." Another commented, "Staff are responsive and caring, they always make contact with any concerns they have."