

Dimensions (UK) Limited

Dimensions Worcestershire & Oxfordshire Domiciliary Care Office

Inspection report

Unit 6A1, Revolution House
Stanier Road, Warndon
Worcester
Worcestershire
WR4 9FE

Tel: 03003039037
Website: www.dimensions-uk.org

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

Dimensions Worcestershire and Oxfordshire is a domiciliary care service providing personal care and supported living services for people with learning disabilities or autistic spectrum disorder. The provider currently supports 176 people living in their own homes and in supported living settings in the community. We inspected one of the supported living services where four people were living.

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 received their medicines as prescribed by trained staff who regularly had their competencies assessed.

Infection prevention measures had been established. Staff had a good understanding of these procedures and confirmed they were provided with sufficient supplies of PPE.

The registered manager had quality assurance systems in place to monitor the overall quality of the service provided to people. These systems had led to improvements in the quality of the service being provided to people.

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.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the guidance CQC follows to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

The service was able to demonstrate how they were meeting the underpinning principles of right support, right care, right culture. The management had developed a person-centred approach to each person's care and support.

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

Rating at last inspection

The last rating for this service was good (published 11 December 2017)

Why we inspected

We undertook this targeted inspection to check on a specific concern we had about medicine management. The overall rating for the service has not changed following this targeted inspection and remains good.

Targeted inspections do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We found no evidence during this inspection that people were at risk of harm from this concern.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Dimensions Worcestershire & Oxfordshire Domiciliary Care Office on our website at www.cqc.org.uk.

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.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Dimensions Worcestershire & Oxfordshire Domiciliary Care Office

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check on a specific concern we had about medicine management.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

This service provides care and support to people living in a 'supported living' setting, so that they can live 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 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

This inspection was unannounced and took place on 27 October 2020.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

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 also requested feedback from Healthwatch to obtain their views of the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We used all of this information to plan our inspection.

During the inspection

We spoke with five members of staff including the operations director who is also the registered manager, locality manager, senior care worker and care workers.

We reviewed a range of records. This included two people's care records and multiple medication records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with two relatives about their experience of the care provided.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question, we had specific concerns about.

This inspection was to check a specific concern we had about medicine management. We will assess all of the key questions at the next comprehensive inspection of the service.

Using medicines safely

- The provider had systems in place to ensure people received their medicines as prescribed.
- Medication records included protocols for 'as and when'[PRN] to take medicines.
- People were supported to take their medicines by trained staff. Staff we spoke to knew what people's medicines were and how to administer safely and as prescribed.
- A relative complimented staff in how they dealt with their family member when they needed to go to hospital, they told us it was dealt with well and they were kept in the loop throughout.
- Staff were trained and regularly had their competencies checked in the administration of medicines.
- The registered manager and locality manager had reviewed the current medication systems and told us a new system was being introduced. For example, a new 28 day repeat ordering cycle.
- There were procedures in place for safe receiving, storage, administration and disposal of medicines.

Assessing risk, safety monitoring and management

- Staff had access to professional guidance and training in regard to specialist equipment such as percutaneous endoscopic gastrostomy (PEG). [PEG] stands for percutaneous endoscopic gastrostomy, a procedure in which a flexible feeding tube is placed through the abdominal wall and into the stomach.
- Risks were assessed and managed. For example, epilepsy management plans were in place.

Systems and processes to safeguard people from the risk of abuse

- People were supported by trained staff who understood how to protect them from harm.
- Staff knew how to identify abuse and how to raise any concerns. Staff we spoke to said they would be confident to raise any issues and concerns.

Preventing and controlling infection

- Staff had been provided adequate training in relation to infection control.
- Staff were provided with sufficient personal protective equipment [PPE]. On the day of the visit we saw staff wearing PPE as per current guidelines.
- The provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The registered manager had oversight of incidents and accidents in the home and any actions taken so

lessons could be learnt. Where learning from events were identified this was shared with the staff team through staff meetings and the communication book.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question, we have specific concerns about.

The purpose of this inspection was to check a specific concern we had about medicine management. We will assess all of the key questions at the next comprehensive inspection of the service.

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 understood their responsibilities to meet regulatory requirements and to notify CQC and other authorities of certain events.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- There were systems in place to monitor the service and ensure people were kept safe and to make any improvements required. The registered manager and locality managers had access to these systems, regularly reviewed and took any necessary actions.
- The registered manager had recently reviewed medicine management within the home. For example, new processes to record stock control were in place and, new ordering processes were introduced.
- The registered manager told us, they held staff meetings to discuss and reflect on practice. Staff spoke positively about the training and support they had received to enable them to carry out their job role.
- Staff told us they had regular supervisions to identify any further training needs or support.
- The provider had adapted the training during the Covid-19 pandemic so people were supported to receive good care.

Working in partnership with others

- The staff team worked with the local authority and health professionals including occupational therapist, speech and language therapist and psychiatrist.
- Records showed multi-disciplinary teams were involved with people's care and support.

We saw in people's support plans there was specific guidance for staff to follow. For example, with PEG and epilepsy management.