

Daisychain Homecare Services (Bakewell) Limited

Daisychain Homecare Services

Inspection report

Unit 21, Molyneux Business Park
Whitworth Road, Darley Dale
Matlock
Derbyshire
DE4 2HJ

Tel: 01629735100

Date of inspection visit:
11 May 2022

Date of publication:
08 June 2022

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

Daisychain Homecare Services is a domiciliary care agency. It provides personal care to people in their own homes. The service provides support to older people, including people with dementia and younger adults. At the time of our inspection there were 139 people using the service.

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

People felt the care and support they received from the service was safe. The provider worked alongside the local authority to report and investigate concerns of abuse. Risks were assessed and staff were provided with enough guidance to support people safely. People received their medicines safely.

There were enough staff to meet the needs of the people using the service. People told us they received their care calls on time and knew the staff who were supporting them. Staff were suitably qualified to do their jobs.

People and staff were positive about the leadership and support provided by managers and office staff. There were opportunities for people and staff to provide feedback and we saw how this feedback was used to drive improvements within the service.

There were quality assurance systems in place to monitor the quality of the service. A range of checks were completed by the registered manager to ensure risks were identified and action was taken to mitigate them.

People were complimentary about the care they received and staff were dedicated to providing compassionate and person-centred care.

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 good (published 9 February 2018).

Why we inspected

We undertook this inspection as part of a random selection of services rated good and outstanding.

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 well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Daisychain Homecare Services

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 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 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 the service 48 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.

What we did before the inspection

We used information gathered as part of monitoring activity that took place on 25 February 2022 to help plan the inspection and inform our judgements. 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.

During the inspection

We spoke with eight people who used the service, seven relatives of people who used the service and two advocates. We spoke with ten staff members, including the registered manager, the nominated individual, office staff and home support workers. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of records, including 11 people's care records and multiple medication records. We looked at three staff files in relation to recruitment. A variety of records relating to the management of the service were reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. The provider had a safeguarding policy in place which was understood and followed by staff.
- Staff had received safeguarding training and could tell us about how they would identify and report abuse. Staff told us they felt confident their concerns would be listened to and acted on by the registered manager and provider.
- The provider had made safeguarding referrals to the local authority when concerns about abuse had been raised. We saw they worked with the local authority to complete investigations.
- All of the people and their relatives we spoke with told us they felt safe using the service. People felt they could contact the provider if they ever did feel unsafe.

Assessing risk, safety monitoring and management

- Risks to people's safety had been assessed. Care files provided enough guidance for staff to follow to support people safely. We saw risk assessments were reviewed regularly and updated when there was a change in people's needs.
- A care co-ordinator was responsible for initial assessments prior to care packages being accepted. This ensured the service could meet the needs of people safely.
- Property risk assessments were carried out in people's homes. This reviewed any hazards within the environment that may have restricted access or posed a risk. This ensured people and staff were safe.
- Key information including people's risks was easily accessible for staff on an app they used. This allowed managers to update staff on any changes in people's needs quickly.

Staffing and recruitment

- There were sufficient staff to meet people's needs. When planning rotas, the registered manager took into consideration the geographical area so people received a consistent and reliable service.
- People told us they received their calls on time and were supported by regular staff who they felt were suitably qualified. One person said, "I always get the required two carers and they are always on time, within five minutes or so. If they are running late, they always ring in cases such as snow, but they have never missed a call."
- There were effective arrangements in place to ensure the service continued to run when faced with unexpected situations such as staff shortages or adverse weather. This included an on-call member of staff, use of company vehicles and a contingency plan which prioritised people based on their needs.
- Staff had received training to carry out their role. This included training in relation to the specific needs of the people they supported such as diabetes, end of life and pressure care. Staff told us they were happy with

the training provided.

- Staff were safely recruited. We saw safe recruitment procedures were used, including the use of DBS and references to support in making safe recruitment decisions. Disclosure and Barring Service (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; Learning lessons when things go wrong

- People received their medicines safely. One person told us "They give me my tablets, no problem".
- Medicine administration records were completed by staff when supporting people with their medicine. There were systems in place to monitor and review people's Medicine Administration Record (MAR) to ensure these were completed appropriately.
- Staff had received training to administer medicines and regular competency checks.
- The provider ensured lessons were learned after things had gone wrong. For example, to address medicine errors the registered manager had created a MAR training course which involved staff reviewing a fictional MAR sheet to improve staff competence when completing MAR's.

Preventing and controlling infection

- The provider ensured staff had access to personal protective equipment (PPE). People 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.

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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider had effective governance systems in place to monitor the quality of the service and drive improvement. The registered manager completed a range of audits on a monthly basis including falls audits, accident and incident audits, MAR audits and care file audits. Areas for improvement were identified and actioned.
- Office staff also completed reviews of key service information. An administration assistant monitored staff logging in and out times. Each month they created a statistics report which identified staff who were below target. We saw effective action was taken to address this, such as monitoring and discussions with the staff member as statistics had improved over the last four months.
- The registered manager understood their role and responsibilities. They were supported by the provider and they worked collaboratively. The registered manager told us, "We both bring different things to the table, my skills are different to [the providers] but we both support each other very well."
- The registered manager showed commitment to continuous learning and improving care and was receptive to feedback. For example, there was an ongoing service improvement plan in place.

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

- People and relatives spoke highly of the management of the service and felt the service was well led. The provider led by example. One relative told us "[The provider] is very hands on and knows all their clients and carers. I feel I know them well and would not hesitate to call [provider] if I needed to directly."
- There was a positive culture at the service. People reflected on the compassionate care provided and gave examples of times Daisychain Homecare Services had gone, "Above and beyond". One person said, "I needed them, and they were there for me." A relative told us about how they looked out for two family members, although only one was their client, they said "They are very caring, I thought that was thoughtful to look out for [other relative] too."
- Staff told us they enjoyed working for Daisychain Homecare Services and were motivated by providing person-centred care. One member of staff said, "With the clients, it's not like going to work, it's like going to see a family member." Another told us "I like being able to support people to stay in their own home."

Working in partnership with others

- The provider worked in partnership with a range of professionals. We saw how the care co-ordinator liaised with healthcare professionals to ensure safe discharges from hospital. For example, they had

contacted an occupational therapist to ensure adaptive equipment was in place before a person went home.

- The provider worked alongside commissioners to ensure people's care packages were appropriate for their needs. The provider acted on feedback from people and staff, for example when people told staff they could leave after finishing their tasks as people wished to be left to continue with their day. When care calls were commissioned for longer than required the provider contacted people's social workers to discuss adjusting their care calls to a more appropriate length of 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 provider understood and acted on the duty of candour. The provider apologised to people when things went wrong. People told us the provider was open and honest, one person said, "[Provider] is very good, they are open and easy to talk to."
- The provider had also arranged for staff to attend training on duty of candour.

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

- People received reviews of their care needs and had the opportunity to reflect on the service they received. We saw how their feedback was used to make changes, such as the length or times of care calls.
- Staff had opportunities to feedback into the running of the service. We saw how team meetings were held and staff received supervisions. Staff told us they felt supported in their roles, one staff member said, "[The provider and registered manager] will always try and do their best for you."
- The provider sent regular surveys out to people and their relatives for feedback on the service and their feedback was listened to. For example, someone felt their care calls had been rushed, this was then an agenda item to address with staff at a staff meeting.