

Destiny Recruitment Agency Limited

Destiny Recruitment Agency

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

This inspection took place on 18 October 2016 and was announced. Destiny Recruitment Agency provides community support and personal care to older people, people living with dementia, people with learning and physical disabilities and younger adults, in their own homes. At the time of the inspection there was one person receiving support from the service. This was the agency's first inspection since registration.

There was not a registered manager in post at the time of the inspection. However there was a new manager in post who told us they planned to submit an application to become registered, once they had completed their probationary period of employment. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People felt safe. Staff understood their responsibilities to protect people from harm and knew how to report any concerns about people's safety. Staff were aware of risks to people's health or well-being and risks had been assessed and managed to reduce the risk of harm. People received support from a consistent and reliable staff team. The provider had systems in place to ensure only suitable staff were recruited to work with people.

Staff had the skills and knowledge required to support people. Staff had received training relevant to their role. People were asked for their consent before care and support was provided. Staff knew how to respond to a change in people's health needs.

Relatives told us the staff who supported their family members were friendly and caring. People were supported by staff who understood their needs and preferences. Staff supported people in a way that respected their culture and maintained their privacy and independence.

People and their relatives were involved in the planning, assessment and review of their care. Staff understood people's needs and preferences. People knew who to contact if they were unhappy about any aspect of their care. There was a system in place to manage complaints.

People were happy with the support they received. Staff understood their roles and responsibilities and felt supported by the manager and provider. Systems were in place to monitor the service to ensure people received quality care.

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.

People were supported by staff who understood their responsibilities in keeping people safe from harm and knew how to report any concerns. Risks were assessed, managed and reviewed to protect people from avoidable harm. People received support from a consistent, reliable staff team.

Is the service effective?

Good ●

The service was effective.

People were supported by staff who had the skills and knowledge required to care for them. People were asked for their consent before care was provided and staff supported people to make their own decisions where possible.

Is the service caring?

Good ●

The service was caring.

People were supported by staff that were kind and caring. Staff supported people in a way that took account of their diverse needs. People were supported by staff who upheld their privacy and promoted their independence.

Is the service responsive?

Good ●

The service was responsive.

People and their relatives were involved in the assessment and planning of their care and support. Staff were aware of people's needs and preferences. People knew who to contact if they were unhappy with any aspect of their care and there was a system in place to manage complaints.

Is the service well-led?

Good ●

The service was well led.

Relatives and staff spoke positively about the service. Staff felt supported by both the manager and provider. There were

systems in place to monitor the quality of care provided. People had been asked to give feedback about the service they received.

Destiny Recruitment Agency

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 18 October 2016 and was announced. The provider was given 48 hours' notice because the location provides domiciliary care services; we needed to ensure that the manager would be available to assist with the inspection.

The inspection team consisted of one inspector. As part of the inspection we looked at the information we held about the service. This included statutory notifications, which are notifications the provider must send us to inform us of certain events. We also contacted the local authority and commissioners for information they held about the service. This helped us to plan the inspection.

During the inspection we spoke, by telephone, to a relative of the person who used the service. We also spoke with one staff member, the manager and the provider. We looked at records relating to the how the care was delivered for the person who received support from the service. This included one care record, one staff file and records relating to the management of the service including systems used for monitoring the quality of care provided.

Is the service safe?

Our findings

The relative we spoke with told us their family member felt safe with the staff that supported them. They said, "[Person] feels very safe with [staff member]. They get on well and if we didn't think they were safe we would say so." Staff we spoke with had a good understanding of how to keep people safe and knew what action to take if they had concerns. They told us, "If I had any concerns I would contact the office straight away." We spoke with the manager of the service who had a good understanding of how to report concerns to the local authority in order to keep people safe. The provider had systems in place to report allegations of abuse and protect people from harm.

Risks had been identified and assessed to minimise the potential risk to the person's safety. Staff we spoke with knew about the potential risks to the person and were able to tell us how they supported them in a way to reduce risk. The staff member told us, "There is risk when supporting [person] to move. Sometimes they are in pain, I am always mindful of that." We saw care records contained relevant guidance for staff to follow in order to reduce risks. Staff knew how to care for the person safely.

The relative we spoke with told us staff were punctual and stayed with the person for the required time. They told us, "They are always on time and don't just follow a list of tasks. They always ask if we are happy with everything before they leave." The relative told us care was provided primarily by one consistent staff member, but that other staff also knew the person well. This meant the person received care and support from a consistent team of staff which helped them to feel safe.

We looked at the provider's recruitment processes and saw relevant checks had been carried out prior to staff working unsupervised in people's homes. We saw the provider had conducted recruitment checks including requesting references from people's previous employers, identity checks and Disclosure and Barring Service (DBS) checks. DBS checks help providers reduce the risk of employing staff who are potentially unsafe to work with vulnerable people.

The person using the service did not require any support with medicines. However, we discussed medicines with the manager who told us all staff had received training in medicines. They shared with us their plans to ensure any future support they provided with medicines was managed safely. This included regular auditing of medicines administration records and conducting competency assessments with staff to ensure they were safe to support people with their medicines.

Is the service effective?

Our findings

The relative we spoke with told us they felt staff had the skills and knowledge to support their family member. They told us, "Staff understand [person's name] very well. I have no concerns about their skills to support them. I used to feel I had to constantly shadow staff, but with these staff I am happy to leave them to it." Staff told us they felt the training they received equipped them for their roles. A staff member said, "I have attended a lot of training since starting to work with Destiny. I recently did some training in moving and handling, which has given me the confidence to support people who need to use a hoist." Staff told us they received an induction when they first started working at the service, which helped them in their role. A staff member told us, "I was given time to learn and there has been lots of support. I feel competent." Staff felt supported by the provider and had been given opportunities to gain the skills and knowledge required to support people.

The relative we spoke with told us staff asked for their family member's consent before providing them with care and support. Staff understood the importance of gaining people's consent and shared examples with us of how they made sure the person they supported was happy with the care that was being provided. We looked at information about consent in the care record we reviewed and found the person and their family had been involved in making decisions about their care and support.

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 Act 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. We checked whether the service was working within the principles of the MCA. We discussed the MCA with the manager and they demonstrated to us that they understood their responsibilities to assess people's capacity and ensure any decisions made were in people's best interests.

The person using the service did not require any support with their diet or nutritional needs. The manager told us that, where relevant, future care plans would reflect people's dietary needs.

Discussions with staff showed they knew how to respond to people's specific health needs. For example, changes in a person's physical health. A staff member told us, "If I have any concerns about [person's] health, I would speak to their relative and also let the office know." Staff told us and we saw people's care records detailed their health needs, conditions and any prescribed medicines. This provided staff with the information they needed to supported people to maintain their health.

Is the service caring?

Our findings

The relative we spoke with told us they felt staff were friendly and caring. They said, "[Staff member's name] really cares for [person], they have a great relationship with them."

Staff we spoke with told us they enjoyed providing support to the person and were pleased they had been able to establish a positive relationship with them. They shared with us examples of how they listened to what the person wanted and acted in accordance with their wishes. Where the person had specific cultural needs staff were aware and acted in a respectful and supportive way. For example by respecting prayer times.

People were supported to express their views and were involved in making decision about their care and support. The relative we spoke with told us they and their family member had been involved in making decisions about the support they received. Staff were able to tell us how they involved the person in decisions. This included ensuring the person was given every opportunity to make choices for themselves, for example when choosing clothes to wear or how they wished to be supported with personal care. Care records included guidance for staff on how to involve the person in their support and staff told us they had read these before meeting the person. A staff member told us, "I was given the care plan so I had the background information, but more importantly I ask the person. They can make decisions and choices themselves, they just tell me."

People were supported in a way that protected their privacy and dignity. Staff were able to tell us about ways in which they protected people's privacy by closing curtains and doors when providing care and covering people with a towel when supporting them with personal care. They were also aware of the need to be discreet when supporting a person in a busy family home environment. Care records detailed ways in which staff could support the person to maintain their independence and staff shared examples with us of how they promoted the person's independence. For example, by supporting them with their mobility needs.

Is the service responsive?

Our findings

The relative we spoke with told us they and their family member had been involved in discussions and decisions about their care and support. They told us they were regularly contacted by the manager of the service to ensure the support being provided was still appropriate and met the person's needs. The relative said, "We had an assessment before Destiny started providing support and they are always ringing to make sure we are happy and if there's anything that needs to be updated." Staff we spoke with felt they had access to the information required in order to respond appropriately to people's needs. They understood how to deliver the support and care the person needed and were able to tell us about the person's individual likes, dislikes and preferences as well as their health and support needs.

Records we looked at were individualised and contained detailed information and clear guidance about all aspects of a person's health, social and personal care needs, which helped staff to meet people's needs. People's care needs were regularly reviewed and any changes were recorded. Staff told us and we saw, they reported any changes in people's needs to the manager; care records were then updated and other staff informed. A staff member told us, "[Person's name] needs consistency, so if there are any changes I will always contact other members of the team as well as the manager." This ensured people received care that was responsive to their needs.

The relative we spoke with told us they knew how to complain if they were not happy about any aspect of their care or support. They told us, "If there are any problems I've got their number, they'll quickly respond." The relative told us that in the past staff had come to support their family member and the person had not felt comfortable with the member of staff. They told us they had contacted the office and explained they would prefer a different member of staff. They explained that the manager had listened to their concerns and ensured support was provided by another member of staff. The relative said, "With other agencies I didn't even bother complaining as I was always made to feel guilty, but with Destiny they listen and if there's the slightest issues they sort it out." Although there were no current outstanding complaints the provider had a complaints policy in place. The manager and provider were open about where people had, in the past, not received a service that was satisfactory and shared with us the actions they had taken to ensure they learned from people's experiences and complaints. This meant there were appropriate systems in place to manage complaints.

Is the service well-led?

Our findings

The relative we spoke with was happy with the care and support their family member received and felt the service was well managed. They told us they were happy with the group of staff who supported the person and felt the service was good. They also commented that they felt listened to by the staff and the manager and were confident any concerns would be addressed. They said, "I would definitely recommend Destiny to others. I feel I can trust them."

Staff we spoke with understood their role and responsibilities and told us they felt supported by the provider and the manager. They said they were always able to contact a senior member of staff if needed and felt able to discuss any concerns. Staff told us they received support from the manager which included one to one meetings, which gave them an opportunity to receive feedback on their performance in their role. A staff member told us, "I feel very much like I can say what I think; I can just call in to the office."

We found the provider had systems in place to audit the quality of care people received. Spot checks had been carried out to observe staff practice to ensure they were working to the required standard. Staff competency had also been assessed and their performance reviewed through one to one supervision. The views of the person being supported and those of their family members were sought on a regular basis. We saw positive comments made by the person about the quality of care they received. The provider had also sought feedback from other agencies who were involved in the person's care and this was also positive. This showed the provider had systems in place to monitor the quality of service people received.

Although there was no registered manager in post at the time of the inspection, there was a manager who had been recently recruited. They demonstrated a good knowledge of both the person who was being supported and the responsibilities to notify CQC when certain events occurred, such as serious injury. The manager and provider shared with us their plans to develop the service and provide support to more people. The manager told us they were currently focused on developing training opportunities for staff and encouraging staff to continue in their learning. They told us, "We want to make sure we are supporting staff to develop. This way they will provide people with a better service." The manager told us they felt the provider was supportive of their plans and was motivated to improve and develop the service.