

Access Dignity Care Limited

# Access Dignity Care Limited Sudbury

## Inspection report

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Sudbury  
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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

Access Dignity Care Limited – Sudbury is a domiciliary care service providing personal care to people in their own homes. 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. At the time of this inspection there were 31 people using the service, 24 of these were receiving support with personal care.

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

The management team and staff understood their responsibilities to recognise abuse and keep people safe. Risks to people's health, welfare and safety had been assessed and management plans in place to guide staff in steps they should take to safeguard people from the risk of harm.

There were sufficient staff who had the necessary skills and knowledge to meet people's needs and provide care and support in ways that people preferred.

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.

The provider had systems in place to manage medicines and people were supported to take their prescribed medicines safely, and people were supported effectively with their health needs.

The management team promoted a strong culture of putting people at the centre of what they do, and staff treated people as individuals. People told us they were treated with kindness, dignity and respect by staff who knew them well.

The provider had systems in place to check the quality and safety of the service and take the views and concerns of people and their relatives into account to make improvements to the service. There were opportunities made available for people and or their representatives to give their feedback about the service and raise concerns if they needed.

The management team were visible and actively involved in supporting people and staff. Staff were enthusiastic and confident their views were valued by the management team.

Quality assurance visits were undertaken by the registered manager which provided oversight of the service. People and relatives knew the management team well and confirmed they carried out care reviews and spot checks on staff competency.

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 03/09/2019 and this is the first inspection.

#### Why we inspected

This was a planned first inspection since registration.

#### Follow up

We will continue to monitor intelligence we receive about the service until we return to visit as per our reinspection programme. If any concerning information is received, 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?

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.

# Access Dignity Care Limited Sudbury

## **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 Care Act 2014.

#### 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 homes.

#### 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 inspection

We reviewed information we had received about the service. 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. 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 used all of this information to plan our inspection.

#### During the inspection

We spoke with the registered manager, branch manager and four care staff. We reviewed a range of records, including staff files of two staff recently recruited. We looked at records relating to the management of the service, including audits and systems for managing feedback, complaints and records of when checks were made on staff performance and the quality of the care provided.

We also spoke with six people who used the service, one relative and one stakeholder. We looked at training data, care plans, medicines management, quality assurance records and management improvement plans.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

# 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 for 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

- The registered manager had a range of measures in place to help safeguard people from the risk of abuse.
- Staff had received training in safeguarding procedures and knew how to report any concerns relating to people's welfare.
- Everyone we spoke with told us they felt safe using the service. One person said, "They are all wonderful. I feel safe with all of them. They put you at ease. They are lovely people."

Assessing risk, safety monitoring and management

- Risks to people's health welfare and safety had been assessed and monitored.
- The management team carried out comprehensive individual and environmental risk assessments which identified any risks to people with action plans to protect people and staff from the risk of harm.
- Staff told us they were provided with the information they needed to keep people safe. For example, how to move people safely with guidance in the use of equipment.

Staffing and recruitment

- There were sufficient staff to meet people's needs.
- The management team worked to ensure people were supported by a consistent team of staff.
- There was a system in place to monitor late or missed calls. Everyone we spoke with told us they had not ever experienced missed calls. And, if staff were running late, they would be kept informed. One person said, "They [staff] have never missed call. If they [staff] are running late they let me know. There is always a good reason, like if they have to wait for an ambulance for someone else. They do their best."
- Staff told us, "I love my job, we get to build up a relationship with our clients, we have time to chat. If needs change, we report back and they [management team] sort it out to get people the time they need. We have plenty of travel time in between calls so don't feel rushed."
- Required safety checks had been carried out to ensure that staff employed were skilled and suitable to carry out the work they were employed to perform. However, we noted staff started their induction shadow shifts before all checks had been received. Immediately following our discussions with the registered manager, highlighting this as an area of potential risk they notified us of a change in their recruitment policy, stating staff would no longer commence shadow shifts until all required checks had been received.

Using medicines safely

- Staff received training in medicine administration and their competency assessed.
- Care plans highlighted any risk associated with medicines and provided guidance for staff as to how people took their medicines and what support was required.

- People told us they received their medicines as prescribed and at the time they expected.

#### Preventing and controlling infection

- Risks to people from acquiring infections including COVID-19 had been assessed with action plans produced including guidance for staff.
- The service had an infection prevention and control policy in place. Additional guidance in relation to infection prevention and control during the pandemic was introduced to provide staff with current information about COVID-19.
- Staff had received training in infection prevention and control including how to safely apply, remove and dispose of personal protective equipment (PPE). Staff told us they were supplied with enough PPE to undertake their work safely. People confirmed that staff always wore PPE. One person said, "They [staff] always wear PPE and are very good, because it can be a worry with different people coming into your home."
- The registered manager told us they identified people and staff who were more at risk during the pandemic and carried out risk assessments putting measures in place to minimise risks.
- Staff received weekly COVID-19 swab testing and the service had registered for staff to receive vaccinations.

#### Learning lessons when things go wrong

- It was evident from discussions with staff and a review of staff meeting minutes, when things went wrong, the registered manager shared lessons learned with staff and made changes to improve the service.



# 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

- Care plans were comprehensive and personalised. People's needs and choices were clearly identified, and guidance provided for staff on how to support people.

People had personalised care plans that promoted independence and with a focus on their choices, likes and dislikes.

- Staff understood how to support people and care records demonstrated people were treated as individuals and their choices assessed and respected.

- Assessments in relation to COVID-19 had been undertaken and guidelines for staff included to look out for changes to people's health and well-being.

Staff support: induction, training, skills and experience

- Staff undertook an induction programme when first joining the service which included on-line training and shadowing experienced colleagues.

- Practical training in subjects such as moving and handling was delivered face to face.

- Staff had completed refresher training and observational checks were conducted to ensure staff were competent and to identify any further training or support requirements.

- Staff supervisions, spot checks and annual appraisals were carried out and staff confirmed this. One member of staff told us, "I had lots of training which helped me to feel confident. The managers are really supportive. We are a good team; everyone looks out for each other. Any support you need there is always someone available to support you, including out of hours." Another said, "I had All the training and shadowing. I needed. They [management] encourage you to do further courses and qualifications. I have grown in confidence since coming to work here."

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

- Care plans identified people's nutrition and hydration needs. People's appetite and support needs were assessed with guidance provided to ensure the care and support provided met the individual needs.

- Consideration to any dietary requirements was documented including food intolerances and specific health related diets.

- Care plans identified risk factors such as difficulty in swallowing, and measures put in place to reduce risks.

- Staff received training in food hygiene and nutrition and hydration.

- One social care professional told us, "They [staff] take time to ensure [person using the service] has a good diet with quality, freshly prepared food which has meant their blood sugar levels are now more stable and

their diabetes is properly managed."

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

- The service worked closely with other agencies such as community nurses, GP's, occupational therapists and social workers. Contact details of relevant professionals were documented in the people's care plans.
- Where support with daily living was required, for example mobility, assistance was sought from health and social care professionals. The registered manager told us that the occupational therapists had been undertaking video calls during the pandemic to ensure there were no restrictions on referrals for advice on mobility.
- Staff told us they would report any concerns in relation to the person's health to the management team and gave examples of how they had sought emergency services.
- One social care professional told us, "The staff are brilliant. They have gone above and beyond to support [person using the service]. The improvement in their health, appearance and sense of well-being has improved since this agency took on the care of [person using the service]. They really do care. Any feedback we need to give them is taken positively as a learning experience, they want to get things right."

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 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. 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.

- The service was working within the principles of the MCA and had policies and procedures in place.
- Care plans identified people's ability to make choices and best interest decisions were made on their behalf if and when required. For example, in relation to safe administration of medicines.

# 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

- People and their relatives were positive about the service. People told us "Everyone who comes to help me is wonderful. They help me with such kindness and respect." Another said, "I never feel embarrassed when they help me with a wash because they make me feel at ease. They treat me with dignity. I always look forward to seeing them, they brighten my day."
- Care plans considered the person's cultural and spiritual needs and wishes.
- We identified examples of the provider's caring approach, which often went above and beyond the formal contractual agreement. For example, staff supporting people with trips to the hairdresser, collecting fish and chips from a takeaway and enabling people opportunities during the pandemic to maintain contact with their loved ones via technology.

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

- People told us they were able to express their views as to the care they received and were involved in their plan of care. People knew the names of the management team and told us they had visited them and discussed their care needs.
- Care plans identified what the person was able to undertake themselves and how the staff should support them to maintain their independence. People told us they were provided with choices as to how they wished their care to be delivered.
- One person said, "They [staff] always ask if there is anything else they can do for you. I'm not rushed and sometimes they [staff] take the time to sit and have a chat." Another said, "I don't ever feel rushed. They [staff] go at your pace. They [staff] know what I like and yes, they respect my choice of what I want and how I want it. They [staff] always ask if I want another cup of tea before they leave, they know I like my tea in the morning."

Respecting and promoting people's privacy, dignity and independence

- Staff spoke with compassion when they described the people they cared for. Staff told us, "I love my work. I came into this work without care experience but the support I have received has been fantastic. I enjoy coming to work and get great satisfaction out of helping people." Another said, "it's important to treat people with dignity when helping them with personal care, treat people as you would want to be treated."
- People confirmed that staff supported them to maintain their independence. One person said, "They [staff] all treat me very well. They [staff] give me confidence, I cannot fault any of them, they are all wonderful."
- Staff told us they promoted people's independence through encouragement. One staff member told us, "We encourage people to do as much as they can for themselves, it's important not to take over."

# 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; Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- An initial assessment of the person's needs was undertaken, and specific areas of care were documented to provide staff with guidance in how to provide the care required.
- Care plans identified people's preferences and what interests and activities they required support with.
- Where possible people received care from the same staff group and said the service was reliable. People told us, "They have never let me down. Yes, occasionally late, but always a good reason why." Another said, "They gave me the password so I can see on my phone who is coming and when."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were documented. Where glasses or hearing aids were required, the care plan identified the appropriate support the person needed.
- The registered manager told us they could provide information in large print if asked. Examples were given of when pictorial aids had been used to support people with limited verbal communication skills.

Improving care quality in response to complaints or concerns

- The registered manager had a system in place to receive and respond to complaints. A review of complaints received showed these had been responded to in a timely manner with outcomes to people's satisfaction.
- People and their relatives told us where concerns had been raised these had been responded to promptly and lessons learned. One person said, "I have complained once. They [registered manager] dealt with the situation quickly and to my satisfaction."

End of life care and support

- The service did not have anyone receiving end of life care at the time of inspection.
- The registered manager told us they regularly consulted people as to their wishes in planning needs, wishes and choices. They also said not everyone wants to talk about death and we respect that.

# 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

- The registered manager promoted an open culture. Staff told us the registered manager and management team were approachable and supportive. One staff member said, "I am very well supported. I recently needed some time away from work due to personal reasons. The management team gave me paid time off work and have been very supportive. This is good place to work, everyone is so supportive and helpful."
- People told us they thought the service was well-managed. One person said, "They are a big improvement on the last company I certainly would recommend this company, I am quite happy with the care they are giving me." Another person said, "I have no concerns, they are all marvellous. I would recommend them to anyone. I am happy and content with them."

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

- There were clear and effective governance and accountability arrangements in place.
- The registered manager understood the importance of quality monitoring and how to use this information to drive improvement.
- The registered manager understood duty of candour and demonstrated awareness of their legal responsibilities. They knew when notifications were required to be sent to the Care Quality Commission and how to make referrals in the event of a safeguarding concern.
- The registered manager had considered the impact of the pandemic on the service and had updated their policies to ensure compliance with government guidance.
- There were clear and effective governance and accountability arrangements in place.
- The registered manager understood the importance of quality monitoring and how to use this information to drive improvement.
- Staff meetings were held, and minutes were viewed. During the pandemic the service had adapted to ensure social distancing with meetings being conducted through the use of technology.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- People and their relatives were regularly involved in the review of the service they received.
- People were invited to share their feedback as to the quality of care they received. The registered manager and senior care staff completed care visits. This enabled them to speak with people face to face and gain

their feedback about whether they were happy with the service.

- Annual feedback surveys enabled people to comment anonymously on the care they received. Comments from the most recent survey included, "The carers are both competent and kind. I feel they are friends." And, "From the beginning of lockdown the care has been excellent. I have asked for as few as possible staff entering my home. The PPE was very slow in arriving at first, but now every carer attending wears the full protection issued."
- Regular staff meetings were held which provided an opportunity for staff to give feedback.

#### Working in partnership with others

- The service worked effectively in partnership with others to improve outcomes for people. The registered manager and staff had good working relationships with other professionals, people and their families.
- As referred to within other domains in this report, partnership working included accessing support, advice and guidance from the Local Authority, GP surgeries, community nurses, learning disability services and occupational therapists. This ensured people were referred appropriately for specialist advice and support to meet their health and welfare needs.
- The management team were aware of the need to notify CQC and other agencies of any untoward incidents or events within the service.