

# Democare Services Limited

# Legacy Centre

## 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

### About the service

Legacy Centre known as Democare Services Limited is a domiciliary care agency. It provides personal care and support to people who live in their own homes. At the time of inspection there were three people receiving personal care. This included older people and people living with dementia.

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

People and their relatives spoke highly of the care the service provided. They described staff as kind and compassionate who went above and beyond to ensure they received high quality care. They felt safe and supported by staff who genuinely cared for them.

People were safeguarded from the risk of abuse. The registered manager and staff were aware of their responsibilities to keep people safe and could explain the actions they would take to protect the interests of the people they supported.

Risks to people and within their home environments were assessed and well managed. Staff understood infection control procedures and had received training to protect people from infection risks associated with COVID-19.

The service had employed sufficient numbers of staff to deliver the care and support people required. Staff were fully trained and received an induction which involved shadowing the registered manager. Staff told us they felt valued and could seek advice from the registered manager.

There were systems and processes in place to assess, monitor and improve the quality of the care being provided. The service worked in collaboration with people and their relatives by seeking people's opinions to develop care plans that were person centred. The registered manager also worked closely with health care professionals to make sure people received the appropriate care and support.

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 14 April 2020 and this is the first inspection.

### Why we inspected

This was a planned inspection based on the date of registration.

### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

# Legacy Centre

## 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

The inspection was conducted 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.

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.

Inspection activity started on 12 August 2021 and ended on 28 September 2021 when we made phone calls to people using the service and their relatives. We visited the office location on 12 August 2021.

#### 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 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.

#### During the inspection

We spoke with the registered manager. We reviewed a range of records which included three people's care

records. We looked at three staff files in relation to recruitment and staff supervision. 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 spoke with one person who received care and the relatives of another person who used the service via telephone. We also spoke with four care workers.

# 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

- People were protected from the risk of abuse. People told us they felt safe with the care they received. One person told us, "Staff are very friendly and very gentle", and a relative said, "I don't have to worry about anything when staff are here".
- The provider had systems in place to help ensure people were protected from the risk of abuse. Safeguarding and whistleblowing policies were regularly read by staff which outlined their responsibilities in helping to keep people safe.
- Staff we spoke with confirmed they had received training in safeguarding adults which helped them to recognise signs of abuse and take appropriate action in order to protect and promote the safety and wellbeing of the people they support. One staff member described this as, "Protecting people from abuse and neglect and making sure they are safe at all times when providing care. We need to contact our manager and report it if we see any abuse."
- At the time of the inspection there had been no safeguarding concerns raised at the service. However, the registered manager demonstrated they had understood their responsibilities to take prompt action if safeguarding concerns were raised by explaining the action they would take to report concerns immediately and holding staff team meetings to make sure staff followed safeguarding policies and procedures at all times.

Assessing risk, safety monitoring and management

- Personalised risk assessments were carried out for all people who used the service. These included all health risks associated for each person. For example, where a person had a risk of falls, their assessment determined that this person required specialised equipment and included factors for staff to be aware of to prevent any avoidable injury.
- Risk assessments contained guidance for staff to protect people from identified risks. These also had instructions for staff when lone working in order to keep them safe.
- Risk assessments in relation to people's home environment were completed to help ensure the safety of people receiving care and the staff who supported them.

Staffing and recruitment

- There were sufficient staff deployed to meet the needs of the people who used the service. Staffing capacity was assessed to help ensure there was always enough fully skilled and competent staff to provide people with safe, high-quality care.
- People told us they were supported by regular staff members who arrived at their home at the scheduled time and stayed for the agreed length of time. One person said, "They stay for the full duration, but

sometimes they are a bit over", and a relative told us, "I am extremely happy with the service. They are always on time, there are no problems with timing issues."

- Staff told us they had enough time at each person's home and did not feel rushed. The registered manager also provided care support to people and told us, "They are not just clients for us, we care for them as you would care for your parent. We have good communication with all of our clients."
- There was a robust process in place for recruiting staff. Appropriate pre-employment checks were undertaken to ensure suitable staff were employed to care for people. Checks included previous employment references, right to work documents and health checks.

#### Preventing and controlling infection

- The provider had systems in place to help manage the risks during the COVID-19 pandemic. There were policies and procedures to provide guidance to staff in this area and staff took part in regular COVID-19 testing to ensure they were fit to work before entering people's homes.
- Staff were trained in infection control and understood the importance of good hygiene practice during care and support. The provider supplied personal protective equipment such as masks, aprons and gloves to help minimise the risks of infections spreading.
- Risk assessments for COVID-19 were carried out for both staff and people who used the service. These included assessments for people who were categorised as being at high risk based on their individual characteristics such as ethnicity and those with underlying health conditions. This helped to ensure people were protected and not put at avoidable risk.

#### Learning lessons when things go wrong

- The provider has systems to be followed in the event of accidents and incidents. Policies and procedures were provided to staff to inform them of what action was needed to help minimise and prevent occurrences. The registered manager confirmed that there had not been any accidents or incidents but told us that incidents would be recorded and reviewed to improve the service and reduce the risk of repeat incidents.

#### Using medicines safely

- At the time of the inspection the provider did not support anyone who required support with their medicines.
- The provider had systems in place and tools available in preparation for when medicine support would be required. For example, policies and procedures had been distributed to staff and the registered manager confirmed that competency assessments and regular spot checks would be undertaken.



# 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 prior to commencing care to ensure this would be delivered in line with their needs and preferences.
- People and their relatives were involved with the pre-assessment process and creating personalised care plans. A relative told us they had worked with the provider to produce a care plan that reflected their family member's needs and choices.
- People's needs were reassessed following changes to make sure planned care continued to meet their needs

Staff support: induction, training, skills and experience

- People were supported by staff with the necessary skills and experience to deliver effective care and support. People and their relatives felt that staff were trained and competent. They described staff as, "They are a God send" and "They are terrific."
- All staff completed an induction which included shadowing the registered manager to familiarise themselves with the requirements of the role and understand how people would like to be supported. New staff also undertook the care certificate which is a nationally recognised set of competencies related to staff working in social care settings.
- Staff told us they felt supported and listened to by their manager and received regular supervision meetings to discuss their work and development needs.

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 closely with health care professionals for the benefit of the people they supported. The registered manager identified one person who was cared for in their bed who required additional support. They ensured that this person had an occupational therapy referral and received the appropriate equipment and staffing numbers to improve this person's quality of life.
- People were mainly responsible for accessing their own healthcare services with the help of their relatives. However, the provider documented any medical conditions and included contact details for each person's GP to allow staff to contact health professionals when medical help was required.
- Staff worked in collaboration with people and their relatives. One relative told us that staff are attentive to the needs of their family member and act quickly when concerns are identified. A comment included, "They tell me everything regarding [Person's] health."

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 registered manager understood their responsibilities in gaining consent from the people they supported prior to providing care. Consent forms were completed and confirmed that people agreed to receive care and support from the service.
- The provider recognised the importance of ensuring consent forms were completed by each person or if needed by appropriate legal representatives.
- Staff received ongoing training and understood the principles of the Mental Capacity Act 2005.

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

- People's nutritional and support needs with eating, drinking and meal preparation were assessed and recorded in their care plans. Actions for staff were identified and they were aware of people's individual needs.
- Most people were able to eat and drink independently or received support with this from their relatives. However, when required, staff supported people to eat and drink to maintain a balanced diet.

# 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 told us staff were caring and kind and would respect their individual differences. One relative told us, "Sometimes [Person] does not like to be told what to do, [Staff] will take their time and do things slowly and talk with [Person]."
- The registered manager provided a consistent and reliable service and staff had a good understanding of people's needs. Staff confirmed they had enough time to fully care for each person during care visit's and the registered manager told us they would attend a person's home and provide extra support if they were required at late notice as a gesture of good will.
- Staff received equality and diversity training to further increase their understanding of people's rights and to deliver care in a non-discriminatory way.

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

- People were involved with decisions about their care. The registered manager consulted people and their relatives where appropriate, to seek their views and feedback when reviewing care plans. People and their relatives confirmed this and told us their care plans were regularly discussed with the provider.
- Care plans demonstrated people's involvement with records including information that was important to them such as their history, preferences and routines.
- Staff supported people to remain independent and make their own choices and described delivering personalised care. Comments included, "To give clients more choice, support and control so they can decide their own care,", and "Listening to them and respecting their choice and wish for care and knowing their preference when caring."

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence was respected. People and their relatives confirmed this. Comments included, "The carers genuinely care for [Person]" and "[Staff] are encouraging me to use the bathroom rather than give me a strip wash. They try to help me gain normality."
- Staff told us they respected people's wishes and treated them as individuals. One staff member said, "Show care and compassion and respect clients' preferences," and another staff member said, "Being kind and polite and being respectful to clients. Making sure clients' privacy is maintained when giving personal care."
- People's preferences for the gender of staff supporting them was acknowledged and respected.

# 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

- Prior to delivering support, the registered manager would visit each person's home to determine people's needs and preferences in order to provide personalised care. This was clearly documented and regularly reviewed. The registered manager told us, "I go myself, I know everything that they want and how they want to be cared for."
- People's care plans contained information about the support they required and elements of their care that were managed independently or by their family.
- People and their relatives told us the registered manager was attentive and responsive to people's changing needs and readily sought information when developing and updating their care plans.

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.

- The registered manager explored people's communication needs during the assessment process to ensure that people would receive information and support in the way that was tailored to suit their needs.
- The registered manager provided people with staff who were able to speak their first language to help with communication.

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

- The COVID-19 pandemic had a profound impact on the activities available to people. The registered manager described the difficulties faced with the restrictions and the physical limitations of the people they supported. The provider has been mindful of this and has expressed the importance of giving people the necessary time with staff to have conversations and to share their stories.
- People and their relatives had formed positive bonds with staff members. A relative told us, "If there's anything I can't do for [Person] I just have to pick up the phone and call them." The registered manager shared that they acknowledged important days in people's lives such as presented each person they supported with gifts to celebrate their birthday.
- People's care records contained details of their social and cultural interests and things that were important to them.

#### Improving care quality in response to complaints or concerns

- People and their relatives confirmed they had not needed to raise any formal complaints but felt confident to do so if necessary and reassured that they would be dealt with appropriately.
- The provider had a complaints policy in place which explained how a complaint would be investigated and responded to. At the time of our inspection there were no formal complaints received.
- Staff were aware of the actions needed if they received a complaint and told us they would escalate it to the relevant person.

#### End of life care and support

- At the time of the inspection, the service was not providing end of life care and care plans did not contain information on people's end of life care wishes. However, the registered manager acknowledged the importance of discussing people's end of life care needs and confirmed that they would begin the process of gathering this information from people and their relatives to ensure people's preferences about end of life care were known and recorded.

# 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 had a hands-on approach and established systems to monitor the quality of the service in order to provide personalised care.
- People and their relatives spoke positively about staff and the quality of care they received. They told us staff were attentive to their needs and understood how to best support them. One relative said, "I'm so thankful for them caring for [Person]." The registered manager and staff knew all of the people being cared for well and had built good relationships with them. The registered manager told us, "I'm proud of the way we're giving care, we are able to give people time. If it takes 45 minutes instead of 30 minutes we will do that. This is the company policy, we are proud to give the best care, we want to make sure they are better."

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

- The registered manager was clear about the duties of their role and what it entailed.
- Staff spoke passionately about the service and the registered manager. Staff described the registered manager as approachable and supportive and that the service has an open and fair culture. Comments included, "The agency is always trying to give a better service to all clients", and "Our manager is very hard working and makes us feel like family and very fair. [Manager] always tries to help in every situation and guide us."
- Staff understood the requirements of their roles and were involved with spot checks during care visits, where the registered manager would carry out observations to assess the care provided to ensure that it was delivered to the required standard.

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

- People were involved with all aspects of their care. People and their relatives described staff as being respectful and passionate and would fully consider their needs and treat them as individuals. One relative told us, "They are extremely helpful. If [Person] needs anything they will never turn around and tell me no it's not written in the care plan. They never say no."
- The provider sought the views of the people they supported by the means of satisfaction surveys and maintaining open communication. Satisfaction surveys were sent to people for feedback regarding the quality of care received. Comments from a survey distributed in June 2021 were positive and

complimentary.

- Records confirmed that staff were given the opportunity to attend meetings to discuss work practices, developmental needs and their well-being.

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 had a duty of candour policy and understood their responsibility to be transparent and honest if things went wrong. This had been shared with staff and the registered manager told us they maintained oversight of the service and communicated with staff daily to have an open dialogue to encourage improvement.
- At the time of the inspection, no incidents had occurred which the duty of candour had applied, however, there was a system in place for staff to report concerns, accidents and unplanned events.

Working in partnership with others; Continuous learning and improving care

- The registered manager was committed to improving the quality of care for people and worked in collaboration with health and social care professionals to provide the best possible outcomes for people. For example, where people needed health care assessments this was sought and documented in care plans.
- The registered manager also developed working relationships with a neighbouring health care provider to share information and best practice.
- The registered manager told us they had a plan to develop and expand the service by primarily focusing on reflective practice and continuous improvement to deliver high-quality care. We were shown examples of future working, for example, people who used the service did not receive support with their medicines. However, the registered manager aimed to embed safe practices for staff to follow in the event of supporting people with their medicines by maintaining open communication and emphasising the importance of keeping updated with medication polices.