

De Vere Care Partnership Ltd

De Vere Care Partnership - Chelmsford

Inspection report

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28 September 2023

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and 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 supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

De Vere Care partnerships – Chelmsford is a domiciliary care agency providing care and support to people living in their own homes. At the time of inspection, the service was supporting 136 people.

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

Right Support:

The provider operated robust systems to help ensure risks to people's safety and welfare were assessed and mitigated. People's medicines were managed safely, and their independence with this task was promoted where possible.

The provider operated a robust audit system to enable effective oversight of the service. Staff were recruited safely and there were sufficient staff deployed to meet people's needs. There were no missed care calls and people knew who would be providing their care. Staff were appropriately inducted into the service and training was on-going throughout employment and as required.

Care plans included detailed information about the support people required. Where needed staff made appropriate referrals to other agencies and external professionals. 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.

Right Care:

Care was person-centred and respectful and promoted people's dignity and privacy. People and their relatives told us people were well cared for. Staff had training on how to recognise and report abuse and understood how to protect people from poor care and abuse. People's care plans reflected their individual support needs.

Right Culture:

People received consistent care from a staff team who understood their individual needs. The provider's management team led the service with an open and inclusive management style that helped to ensure people, their relatives and staff views were heard, listened to and acted upon.

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 August 2022).

At our last inspection we recommended the provider look at best practice guidance in relation to people's protected characteristics and how to manage people's choices about the gender of staff providing their care. At this inspection we found the provider had acted on this recommendation and had made improvements.

Why we inspected

We received concerns in relation to staff skills and experience. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report. The overall rating for the service has remained Good based on the findings of this inspection.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

This was an 'inspection using remote technology'. This means we did not visit the office location and instead used technology such as electronic file sharing to gather information, and video and phone calls to engage with people using the service as part of this performance review and assessment.

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.

De Vere Care Partnership - Chelmsford

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 undertaken by 1 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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

Inspection activity started on 12 September 2023 and ended on 28 September 2023. We visited the location's office on 28th September 2023.

What we did before the inspection

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 reviewed information we had received about the service since the last inspection. We used all the information we gathered to plan our inspection.

During the inspection

We received written feedback from 4 external professionals who worked with the service, 8 people, 10 relatives and 14 care workers. We spoke with the registered manager, the compliance manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed 3 people's care plans and risk assessments, we reviewed 2 staff files, the provider's training matrix and a range of documents relating to management oversight and governance.

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 the same. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Some concerns had been raised by relatives of people using the service regarding medication administration.
- We found staff had received the training necessary to support them to safely administer people's medicines. The management team undertook competency assessments once staff had completed their training to help ensure safe practice. Staff told us their practice was monitored every 3 months to help ensure they remained skilled and competent.
- Staff supported some people with administering their medicines and just prompted others to take theirs as needed.
- Both people and their relatives praised the staff team for the support provided with medicines. A person told us, "My medications are in a blister pack and when I have to take them staff ask me if I remember what medication I need. They do this just to make me feel part of this and to put my mind in function." A relative told us, "The care staff are conscientious and careful in their administering of medication."

Preventing and controlling infection

- Some concerns had been raised about how staff disposed of their personal protective equipment (PPE) when they had completed a care call. Staff described to us how they disposed of used PPE appropriately. The provider's management team monitored this continually to help ensure staff were using and disposing of PPE correctly.
- Staff were provided with training and PPE, including gloves and aprons to help promote effective infection control. Their practice was monitored by the management team during quarterly spot checks. One staff member said, "I received infection prevention and control training. They (provider) supply all PPE I need, do spot checks on me to ensure I use PPE appropriately. Recently I ran out of gloves and office was closed, then I requested this from the on-call person who arranged gloves for me in the same morning."
- People and their relatives told us care staff promoted good hygiene practices.

Staffing and recruitment

- People and their relatives felt there were enough staff available to meet people's care needs. They told us there had not been any missed care calls and all feedback indicated staff provided people's care within agreed timeframes.
- People and their relatives told us a stable team of staff was employed to provide care and support. One person told us, "I have a regular team of workers daily, with some alterations at weekends, but all are caring and assist my mobility."
- The registered manager operated effective recruitment procedures; appropriate checks were undertaken

to help ensure staff were suitable to work at the service. Criminal record checks and satisfactory references had been obtained for all staff before they worked with people independently.

- Staff told us they received appropriate education and support from the management team, from the start. A staff member told us, "Before I started, I had training for my job role so that I can give my best care to the clients. I always get support from the office if I need help with anything or any concerns that I have. Every 3 months I am called into the office for supervision and updated on how the clients feel towards me and my care, how I can improve my service and what I have done well and someone from the office will come out and do spot checks."

Systems and processes to safeguard people from the risk of abuse

- The provider had robust and effective systems to help protect people from the risk of harm or abuse and understood their responsibilities to safeguard people from abuse. The registered manager demonstrated a clear understanding of safeguarding processes and was able to describe where they had worked with the local authority safeguarding team to help promote people's safety and wellbeing.
- Staff received training and were clear about how they would report any concerns both internally to the provider and externally to the safeguarding authorities.
- People and their relatives told us staff provided safe care for people. One person said, "I feel that the staff are providing care safely and I feel very safe with them when they are providing care."

Assessing risk, safety monitoring and management

- Risks to people's health, safety and well-being were assessed and a care package was developed to remove or reduce the risks. Risk assessments enabled people to stay as independent as possible within the confines of their health needs.
- The management team helped ensure people received support in the event of an emergency. For example, they provided a 24 hour on-call service and provided emergency cover if needed for staff sickness or other such events.
- Staff advised the management team acted promptly to help manage risk. A staff member said, "Any issues or concerns raised by us with the office staff and management is always dealt with. For example, we have come across situations where a person will be sent home from the hospital without the proper equipment. As soon as we report the same with our office team, they make sure that they get in contact with the hospital, social services, OT etc and get the equipment in place at the earliest opportunity."
- Relatives were confident staff managed incidents or accidents well. A staff member shared an example where they had arrived at a person's home to find them in distress. The staff member said, just 1 call to the office and help was arranged to provide the support needed. The staff member said it was a smooth process and very supportive approach for both the staff and the person.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Learning lessons when things go wrong

- The provider took appropriate actions in response to any concerns and learning was shared with staff by a variety of means including updates, face to face meetings, group supervisions and team meetings. For example, learning taken from a complaint resulted in the provider making essential care information more easily accessible for the staff team to help ensure people received consistent care and support.

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 the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Some concerns had been raised regarding communication between people's relatives and the provider's office staff. However, we found people, relatives, care workers and external professionals all praised the office staff team for good and clear communication. An external professional said, "In relation to remote interactions I have with their office staff, I have always found them to be very professional, highly responsive and they come across very caring."
- The registered manager had a clear understanding about the duty of candour and told us they encouraged staff to be open and honest in their feedback. Throughout this inspection process we found the registered manager and nominated individual to be honest and open in their approach.
- The management team and staff understood their roles and respected the impact their roles had for people.

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

- The registered manager had a good understanding of their responsibilities towards the people they supported and demonstrated a strong passion for delivering person-centred care.
- People and relatives told us they found the registered manager and the office team to be warm and professional.
- Staff said they felt proud to work for De Vere Care Partnership – Chelmsford. For example, one staff member told us, "I would recommend De Vere care for anyone looking for care because of the dedicated staff and excellent management team."

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

- People and their relatives gave positive feedback about the service and how it operated. A person told us, "I am very happy overall with all the service that I have received from the company, and I would definitely recommend them to others. All I can say is that I am well impressed with all the care I receive from this company." A further person said, "I would recommend De Vere Care to others because they are very reliable people and very kind."
- Staff feedback was sought via satisfaction surveys and face to face meetings with the management team.
- Staff were positive about working for the company. One staff member said, "I would recommend De Vere

Care to other staff looking for care work, have already recommended it to lot of friends working in care in other companies and some of them have switched as well. This company's prime motive is to provide best service to the service user and in the process, they equip us well with all the necessities. For staff, it's like there is no problem that they can't solve."

- Regular feedback about the quality of the service provided was gathered from people and their relatives. The provider had found there had been a poor response to postal quality assurance questionnaires. In response to this they introduced on-line surveys and have found they have received a better response. The satisfaction scores were high and feedback confirmed people were satisfied with the care and support they received.

Continuous learning and improving care; Working in partnership with others

- Learning was taken from incidents to improve people's experience of care.
- The management team worked with external professionals to achieve good outcomes for people. For example, social working teams, community nurses, occupational therapists, wheelchair services, GPs and dentists.
- We received positive feedback from external professionals who had worked with the provider. One professional told us, "I do not have any concerns about this service, and I believe they provide a safe and effective service." A further professional told us, "I can assure you that this company is very committed in not only providing a good standard of care for its service users but also in looking after its management and workforce."