

Dynamic Support Ltd

Dynamic Support

Inspection report

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17 January 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

About the service

Dynamic Support is a domiciliary care and supported living agency. It provides personal care to any adults who require care and support in their own houses and flats in the community. 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. In addition, this service provides support to 14 people living in 2 'supported living' settings, so that they can live in their own home as independently as possible.

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.

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

Right Support:

Staff helped people access health and social care support in the community. They assisted people to enable them to maintain their own health and wellbeing where possible. Staff communicated with people in ways that met their needs. The service gave people care and support in a safe environment.

People were supported to have maximum choice and control of their lives and staff provided them with care in the least restrictive way possible. The policies and systems in the service promoted this practice.

Right Care:

People's needs were appropriately assessed before they moved to the service. The service worked together with healthcare professionals and relatives to ensure people's needs could be met. People were supported with nutrition and hydration. Care was person-centred and promoted people's dignity, privacy, and human rights. Staff understood how to protect people from poor care and abuse. Staff were appropriately trained on how to recognise and report abuse and they knew how to report safeguarding concerns. Relatives of people told us their loved ones were safe living at the service. Care records contained risk assessments with clear guidance for staff to follow. Medicines were managed safely. Staff were recruited safely. The premises were clean and well maintained.

Right Culture:

The registered manager promoted a person-centred environment and people experienced good outcomes. Relatives spoke positively about the management team and staff. People received good quality care and support because staff were trained to meet people's needs and wishes.

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 2 October 2019).

Why we inspected

The inspection was prompted in part by notification of an incident in which a person using the service was potentially subjected to serious abuse. This incident is subject to a criminal investigation and as a result this inspection did not examine the circumstances of the incident. However, the information shared with CQC about the incident indicated potential concerns about the risk of unsafe care and treatment. This inspection examined those risks.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Dynamic Support on our website at www.cqc.org.uk.

Follow up

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Dynamic Support

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

The inspection team consisted of 2 inspectors and 1 Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service provides care and support to people living in 2 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support. This service is also a domiciliary care agency. It provides personal care to people living in their own houses and flats and specialist housing.

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

We gave a short period notice of the inspection because some of the people using it could not consent to a home visit from an inspector. This meant that we had to arrange for a 'best interest' decision about this.

The inspection activity started on 17 January 2023 and ended on 20 January 2023. We visited the location's office/service on 17 January 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We met 3 people who lived in supported living housing. Not all people could use words to tell us about their experience, so we observed interactions between people using the service and staff. We spoke with the registered manager, the deputy manager and 2 staff members. We reviewed care records for 4 people, including risk assessments, and 4 staff files in relation to recruitment. We also reviewed a range of management records concerning staff training, quality audits, medicines, and service user feedback. After the inspection we spoke with 2 people and 6 people's relatives. We contacted 22 members of staff to obtain their opinion on the quality of care provided to people.

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. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding policy and procedures in place. We saw concerns reported had been responded to appropriately and investigated.
- Staff had a good understanding of what to do and had received appropriate and effective training in this topic area. Staff had an electronic app on their mobiles which they could use to raise an immediate safeguarding issue. A member of staff told us, "If I witnessed or suspected an abuse by a colleague, my role is it to report it to the management of my company. I can go ahead to report to the authority, say CQC, if it wasn't handled properly by my employer."
- People supported by the service were provided with sessions to raise their knowledge of abuse and how to report it. We asked people if they felt safe and no-one we spoke with expressed any concern about their safety.
- Relatives were confident that their family members were kept safe by the service. Comments from relatives included, "They (people) are definitely safe with their support staff" and "The support staff are very good and they are helpful."
- Staff knew to report concerns to the provider who then investigated and reported appropriately.

Assessing risk, safety monitoring and management

- Risk assessments were in place to reduce the risk of harm to people and risk management plans provided staff with guidance on actions to take to reduce identified risks. For example, there was detailed guidance about a person's epilepsy condition.
- People's records contained information about how to reduce causes of behaviour that may distress them or put others at risk. Where risks were identified, there were relevant plans in place to guide staff how to manage these.
- Risk areas were identified for staff going into people's homes alone and included assessments of the general environment.

Staffing and recruitment

- There were enough staff to meet people's needs, which was confirmed by their relatives. One person's relative told us, "[Person's] main carer has been the same person for about five years now." Another person's relative told us, "(People) have the same five or six carers looking after them."
- The provider operated safe recruitment systems and ensured appropriate pre-employment checks were completed before staff were employed.

Using medicines safely

- Where people required support to administer their medicines, staff administered these safely.
- Records were kept of the medicines staff administered. These were checked regularly to help ensure any errors were identified and relevant actions were taken to reduce future errors.
- People had their medicines reviewed to ensure they were appropriate to meet the person's health needs. One person told us they were supported to see their mental health care professional to review their medicines and felt positive about this.

Preventing and controlling infection

- Staff had attended infection control training and demonstrated they knew how to prevent the spread of infection.
- Personal protective equipment (PPE) was available to staff.

Learning lessons when things go wrong

- The registered manager was reflective and informed us that a recent safeguarding concern had resulted in providing updated professional boundaries training. They reflected that they felt they managed recent concerns appropriately. They explained to us that relationships established when working very closely with people and families could lead to misunderstandings if the management were not informed in a timely manner of emerging concerns.
- Recording of documents and action taken when things went wrong was robust.

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

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

- We received consistent positive feedback about how the service was managed. Comments included, "I think they are well organised" and "The carers are very well organised."
- Staff felt supported in their roles. We heard positive comments about the management of the service. A member of staff told us, "I feel well supported in my role." Another member of staff told us, "I feel fully supported by the management of Dynamic Support, they are always at hand to give help and assistance when required at any time of the day."
- We saw at this inspection that the service had a strong focus on people and supported them to achieve positive health outcomes and their goals.

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

- There was an effective overview of the quality of the service. This was supported through measures such as audits in areas of medicines, recording and documentation of people's records. In addition, unannounced observations took place where staff were delivering care.
- The registered manager had a good understanding of regulatory requirements. They kept updated by receiving latest guidance from bodies such as the Care Quality Commission (CQC) and National Institute for Health and Care Excellence (NICE).
- There was a clear system of delegation and staff understood what their roles entailed.

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 service was acting on its duty of candour.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics No change from last report

- People were involved in their care provision, from developing care plans to feeding back into how the service could be run. Regular meetings or phone calls took place with the person's family or representatives. Regular surveys were also conducted to gain feedback from families and other representatives.
- The service operated an 'open door' policy to all people, staff, and families or representatives. This was to ensure any queries or concerns were dealt with immediately.
- Regular team meetings were held to discuss how best to support people to achieve their goals. All staff

were encouraged to deal with people's suggestions.

Continuous learning and improving care; Working in partnership with others

- The service worked closely with health and social care organisations to ensure people received the care, support and treatment they required.
- The registered manager, the provider and staff were committed to the continuous improvement of the service. They used external consultancy in order to improve quality of the service. The external consultant told us, "Dynamic Support has a focus on continuous improvement, and I am pleased to be able to contribute to this by undertaking external governance audits. The team always act upon the suggested improvement actions and it is so rewarding to see the impact of these on the lives of the people who Dynamic Support serves."
- The service maintained close links with services such as GPs, district nurses, and psychiatrists, as required. This was underpinned by a policy of relevant information being shared with appropriate services within the community or elsewhere.