

Independence with Dignity Support Services Ltd

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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 the 14 and 18 January 2016 and was announced.

Independence with Dignity Support Services Ltd is a small domiciliary care agency. Care and support is provided to people in their own homes and within the community to promote their independence and well-being. At the time of our inspection the service was supporting 16 people who had a range of needs such as learning disability, physical disability, sensory impairment and mental health.

The service had a registered manager. A registered manager is a person who has registered with the 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 told us that they felt safe with staff and would be confident to raise any concerns they had. The provider's recruitment procedures were robust and medicines were managed safely. There were sufficient staff to provide safe, effective care at the times agreed by the people who were using the service.

There were procedures in place to manage risks to people and staff. Staff were aware of how to deal with emergency situations and knew how to keep people safe by reporting concerns promptly through processes that they understood well.

Staff received an induction and spent time working with experienced members of staff before working alone with people. Staff were supported to receive the training and development they needed to care for and support people's individual needs.

People and their families and external professionals who were involved in their care were complementary of the services provided, describing the care and support as 'outstanding'. The comments we received from people demonstrated that people felt valued and listened to. People were treated with kindness and respect whilst their independence was promoted within their homes and the community.

People's needs were reviewed regularly and their care and support plans promoted person-centred care. Up to date information was communicated to staff daily to ensure they could provide the appropriate care and support for each individual. Staff knew how to contact healthcare professionals in a timely manner if there were concerns about a person's wellbeing.

The provider had an effective system to regularly assess and monitor the quality of service that people received. They were in the process of improving electronic monitoring processes.

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.

Staff knew how to protect people from abuse.

People who use the service felt they were safe when receiving care and support from staff.

The provider had robust emergency plans in place which staff understood and could put into practice.

There were sufficient staff with relevant skills and experience to keep people safe.

Medicines were managed safely.

Is the service effective?

Good ●

The service was effective.

People were involved in their care and their consent was sought before care was provided. They were asked about their preferences and their choices were respected.

People had their needs met and were supported by staff who had received relevant training and who felt supported by the provider and registered manager.

Staff sought advice with regard to people's health, personal care and support in a timely way.

Is the service caring?

Good ●

The service was caring.

People were treated with kindness and respect. Their privacy and dignity was protected.

People were encouraged and supported to maintain their independence.

People were involved in and supported to make decisions about

their care.

Is the service responsive?

Good ●

The service was responsive.

Staff knew people well and responded quickly to their individual needs.

People's assessed needs were recorded in their care and support plans that provided information for staff to support people in the way they wished.

There was a system to manage complaints and people were given regular opportunities to raise concerns.

Is the service well-led?

Good ●

The service was well-led

There was an open culture in the service. People and staff found the registered manager approachable, open and transparent.

People were asked for their views on the service. Staff had opportunities to say how the service could be improved and raise concerns.

The quality of the service was monitored and action taken when issues were identified.

Independence With Dignity Support Services Ltd

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 the 14 and 18 January 2016. It was carried out by one inspector and was announced. 48 hours' notice of the inspection was given because the service is small and the manager is often out of the office supporting staff or providing care. We needed to be sure that they would be in the office. We were assisted on the day of our inspection by the registered manager.

Prior to the inspection we looked at the provider information return (PIR) which the provider sent to us. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. Additionally we looked at all the information we had collected about the service. This included any notifications the service had sent us. A notification is information about important events which the service is required to tell us about by law.

During the inspection we sought feedback from people who use the service, their relatives, staff and health and social care professionals. We obtained the views of six people and four relatives of people who use the service who spoke on behalf of their family member. Additionally we spoke with the registered manager, five members of staff and four health and social care professionals.

We looked at three people's records and records that were used by staff to monitor their care. In addition we looked at five staff recruitment files, staff training records and documents, which included electronic documents that related to the management and quality monitoring of the service.

Is the service safe?

Our findings

People were protected against the risks of potential abuse. There had been one safeguarding investigation since Independence with Dignity Support Services Ltd registered with the Care Quality Commission (CQC), 22 July 2014. The registered manager reported the incident to the local authority safeguarding team and notified the CQC as required. Records detailed the actions taken by the service as well as the outcomes of the investigation.

People told us that they felt safe from abuse and or harm from their care and support workers. Comments included: "everything is fine. I have contact numbers if I have any worries".

People's families also felt their relatives were safe using the service. A person's relative remarked: "I have absolutely no concerns; we have had other care providers over the years, and not wanting to down the other providers, but I think this agency is outstanding. They are very proactive and work within appropriate boundaries".

Staff told us they knew what to do if they suspected one of the people they supported was being abused or was at risk of abuse. They were provided with details of the company's whistle blowing procedure and had the training and knowledge to identify and report safeguarding concerns to keep people safe.

There were enough staff employed by the agency to safely meet peoples' needs within the timeframes of their care packages. Risk assessments had been carried out to identify any risks to people and or the staff, when staff were providing care and support to individuals. These were reviewed regularly and included guidance to staff on what to do to minimise any identified risk, such as environmental risks within people's homes.

Other areas assessed for staff safety included the area local to the home of the person receiving the service, and other risks related to staff lone working. The registered manager informed us that the radius of travel for staff to people who use the service was kept to a minimum. there was a 24 hour on call system should there be an emergency. All staff had a personal mobile device 'smartphone' that allowed them to access up to date information and communicate information to the staff team in an emergency. Emergency contact details were given to people should they require assistance in an emergency or have a concern.

The provider had effective recruitment practices which helped to ensure people were supported by staff of good character. They completed Disclosure and Barring Service (DBS) checks to ensure that prospective employees did not have a criminal conviction that prevented them from working with vulnerable adults. References from previous employers had been requested and gaps in employment history were explained.

Staff had received training in the safe management of medicines. People we spoke with either looked after their own medicine or were supported by relatives. A relative stated: "(name) is independent with her medicine, the carers just make sure it is near her so that she can take it when needed". Where the service supported people with medicines this was set out in their care plans which detailed whether staff needed to

prompt, assist or administer the medicines.

Is the service effective?

Our findings

The provider information returns (PIR), dated 8 November 2015, stated that they had made 167 scheduled visits to people with no missed calls. This was within the seven days prior to completing their PIR.

Discussions with people and their relatives during our inspection confirmed that staff mostly turned up on time and stayed the agreed time. People said: "they visit me for 30 minutes each day; they always stay the whole time and sometimes a little more". "I don't ever feel I'm being rushed" and "most of the time they arrive on time".

A person who uses the service and their relative told us that: "the only thing we are unhappy with is that we usually receive the schedule late on a Thursday, but we really need it on a Sunday. Another relative stated: "I look at the care diary that the carers' fill in. I'm confident that they arrive on time. However, it is better to observe and so sometimes my visit overlaps theirs".

Staff told us that they were always given enough time to support people safely without feeling they had to rush. They told us there was a "good on call system" should they come against a problem that may prevent them from arriving at their next call. Some of the comments we received from staff included: "independence with dignity are only a small company which means staff have enough time at each client's calls". "(Name of the registered manager) makes sure that there is always enough travel time in-between as well".

People and their families who spoke with us on their behalf told us that they have received care and support from familiar, consistent care and support workers. They told us that they would recommend the service to another person. A comment from one person about the care workers had been that they were: "out of this world". A relative of a person stated: "(name) feels she sees regular carers', so she knows them a lot and has a lot of respect for them". Another relative said of Independence with Dignity Support Services Ltd that: "they are one of the best - it is usually the same woman (carer) and if not they tell (name) the day before and let her know who will be calling".

Staff had attended regular staff meetings and had received one to one supervision that supported their development needs. Staff told us that they had received a thorough induction that enabled them to support people confidently. They told us that they completed regular updated training and were very positive about the support they received from the registered manager. Comments about the support they received included: "I just love this job; they do not give you too much that you can't handle" and "the communication is really good, I probably call her (the registered manager) too much". Staff training had been arranged for staff to meet health and safety, mandatory and statutory requirements as well as training to support specific individual needs.

People were supported to attend health care appointments with their GP and other healthcare professionals and to make healthy living choices regarding food and drink. Relatives of people stated: "they (in reference to staff) visit daily, and help her with personal care and to go out shopping or attend appointments like the GP". "They are very flexible in terms of responding to (name's) wishes and promoting independence". People received support from staff with light meals such as ready meals, sandwiches, soup,

drinks and snacks. Any specialist dietary needs were taken into account such as diabetes. For example one member of staff stated: "we work closely with the community nurse who visits a person at the same time as we do. They always let us know about the person's blood sugar level, so that we can support the person to make healthy choices when shopping for groceries".

A professional said of the agency: "they have had some difficult and complex cases which they persevered with and supported through difficult times with amazing results – I would consider life changing in some cases". Another professional stated: "dedicated staff with innovative ideas who have shown real and genuine commitment to working with vulnerable individuals and professionals to achieve and maintain independence".

People's rights to make their own decisions, where possible, were protected. People told us they were involved in decision making about their care and support needs. Staff received training in the Mental Capacity Act 2005 (MCA). 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. We checked whether the service was working within the principles of the MCA.

Is the service caring?

Our findings

People received care and support from staff who had got to know them well. The relationships between staff and people receiving support demonstrated dignity and respect at all times.

People told us that their care support workers were always caring and kind and treated them with respect and dignity. They stated that they had always been introduced to new staff prior to receiving care and support from them. Comments included: "because I'm quite young it's nice that I get treated the way I'm treated - you know what I mean; they respect me".

People said: "staff were very helpful" and remarked that: "they don't rush me in any way". One person stated: "they actively treat me like a proper person and don't talk down to me and won't rush me and if I'm not feeling well, they are very good at knowing what to do". Another person said: "I have been with Independence with Dignity since (date removed) at the age of (age removed) and I cannot fault management and carers they employ. I know that whoever it is that will be carrying out my care will be exceptional and will truly care".

Families of people who use the service had nothing but praise in respect of how their relatives (people who use the services) were treated by staff. They told us that this had given them the reassurances they needed to be confident that their relatives were being cared for and supported in the way they would want to be cared for and supported. One person's relative stated: "(name) will only have female carers and has requested this, which has been respected". Other comments included: "(name) is treated with dignity and respect. I'm quite involved with the care" and "they are very caring and very professional with their clients".

Staff had received training within equality, diversity, human rights, dignity, respect and person centred care. Staff spoke respectfully of people's care and support needs. They gave examples of how individuals preferred to be assisted and of people's wishes and needs such as: "we try to encourage them to come out with us into the community as it is about them having quality of life".

The registered manager stated that she had completed spot checks to observe staff interacting with people to ensure people were being treated with dignity and respect. Additionally the registered manager stated that people's support plans were: "devised with them to ensure their choices and wishes were respected".

External health and social care professionals were very positive about the services provided by Independence With Dignity Support Services Ltd. Comments included: "they are un-phased by difficult situations or people; they have a quality which seems to put a person at ease. In my experience they have treated my client's with respect and dignity. They are encouraging and kind which shows in the outcomes".

Is the service responsive?

Our findings

People told us that they were involved in decision-making about their care and support needs. For example information had been requested from the person, their relatives and other professionals involved in their care. This had been prior to a care and support plan being agreed with the person and/or representative of the person.

Care and support plans were personalised. The examples seen were thorough and reflected people's needs and choices. For example task sheets were person centred and spoke in the voice of the person informing staff how they wanted to be supported around the choices they had made. Risk assessments promoted people's independence, whilst detailing actions staff needed to take to reduce the risk.

The registered manager told us that people's care and support plans were formally reviewed within a 12 month period, or as changing needs required. Staff spoke of good team work and communications to ensure people's needs were met. This had included being provided with a company mobile phone which allowed them to make notes about the daily care and support provided to the persons whilst at the person's home. The notes were detailed on the system so that the next member of staff going to the person's home was aware of any changes. The notes were kept on the main system and were monitored by the service for any significant changes that may have required an early review.

One person told us: "I have a folder with all the information. We had a meeting before I started to receive the service and we all agreed on the type of support I needed". A relative of a person said: "(name) has been using the service for about 11 months so we haven't had a review of the care plan by the agency, but we are happy with the care plan content". Another relative told us that there were care plans and that these had been reviewed, adding: "they (the care workers) are very good, (name) wasn't very well and they popped in (outside of the care package) to see if she was ok".

People were supported to maintain their independence within their own home and to access the community. A relative of a person stated: "they are very flexible in terms of responding to (name's) wishes and promoting independence".

People and their families told us they had the information they needed to know what to do and who to go to if they had a concern or a complaint. The service had not received any complaints in the 12 months prior to our visit. The complaint procedure detailed that complaints and concerns would be taken seriously and used as an opportunity to improve the service. The service had received six compliments in the 12 months prior to our visit.

Is the service well-led?

Our findings

People we spoke with, their families and professionals who were involved in their care were complementary of the services provided from Independence With Dignity Support Services Ltd. They told us that the agency listens to what they have to say and acts on this to promote person centred care and improve services.

Comments from people's families about the services included: "they are very good and I would recommend them" and "I think this agency is outstanding".

Professionals who had commissioned care from the agency gave us their opinion of the services provided. Comments included: "Independence with Dignity have supported a number of my clients over time. They have always been extremely efficient with their response, and the quality of support is in my opinion excellent". "I am consistently impressed by Independence with Dignity and would not hesitate to use them" and "In two words, outstanding and exemplary".

Staff told us that the manager was: "really supportive" and was "amazing". Stating: "she always has her phone on and never moans, so we have no hesitation in phoning her for support".

Quality assurance systems were in place to monitor the quality of the service being delivered. The registered manager had sent questionnaires to people to gain their views of the services provided. These had not been evaluated at the time of our visit for the registered manager to identify trends and/ or areas for improvement.

There were electronic processes newly introduced to monitor the services. These included staff having a company mobile phone to record and monitor people's care and support needs. The registered manager told us that the electronic monitoring system was being further developed. We could see that part of the system was used to monitor staff training and development.

Announced spot checks were undertaken to observe the care practices of staff and to gain people's views. The registered manager told us that limited 'spot checks' had taken place and that this was an area identified for improvement. However, as a small service the registered manager stated: "I ensure that I assist in doing calls alongside the staff weekly so that I can speak with the service users to ensure that safe practice is being carried out at all times". The registered manager also stated: "I lead by example, this both gives the staff support but also the confidence to be proactive".