

Hands of Hope Health Care Limited

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## Inspection report

861 Brighton Road  
Purley  
CR8 2BN

Tel: 07837969001

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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:

Hands of Hope is a domiciliary care agency. It provides personal care to people living in their own houses and flats. At the time of our inspection it was supporting 12 people. The Care Quality Commission (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.

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

People told us they were safe and were protected from the risk of abuse. The service had safeguarding procedures in place that staff were well aware of. Staff received training on safeguarding people. Risk assessments and risk management strategies were in place as part of the assessment and support planning process. This meant risks to people's safety and to staff were minimised.

There were robust recruitment practices in place and sufficient staffing levels to meet people's needs.

The registered manager told us at the time of this inspection staff did not administer medicines. People's relatives undertook the responsibility for this. However, the registered manager said all staff received appropriate training. This together with appropriate supervision and monitoring meant if required staff had clear guidance to follow and people would receive their medicines safely.

The provider ensured that all their staff received appropriate training and support to understand and to manage COVID-19. This included best practice for infection control and the use of PPE. Staff also received appropriate guidance on how to support people with dementia to understand the pandemic and COVID-19. The provider made appropriate support services available to staff in order to support their mental wellbeing through the pandemic and if they became unwell and when they returned to work.

There were systems in place to ensure that accidents, incidents and risks were appropriately recorded and included details of preventive strategies used by the service to reduce the likelihood of events occurring in the future.

Assessments were thorough and expected outcomes were identified. Support plans were reviewed and updated as people's needs changed. People were supported by staff who knew them well and were able to identify people's likes and dislikes. They were supported to eat and drink according to their dietary requirements taking into consideration people's preferences.

Staff received comprehensive training in all the necessary areas of their work. Staff had regular supervision with the registered manager, and they told us they felt supported.

People told us they were treated with dignity and respect. This was echoed by people's relatives. They told us staff had the right skills to deliver appropriate care and support. Staff were able to communicate with

people well. Information was provided in various formats where required to meet people's communication needs.

People and their relatives were confident that any feedback whether this was positive or negative would be addressed appropriately and resolved by the registered manager. They told us the registered manager welcomed feedback and they said complaints were dealt with swiftly and professionally.

People told us they thought the service was well led and that they were very happy with the support they received.

There were effective systems in place to monitor the quality of the service provided to people which ensured good governance. Technology was used effectively by the provider to ensure people were informed promptly about potentially missed or late calls. The service had systems in place to notify the appropriate authorities where concerns were identified. The culture of the service was positive, open and person centred.

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 and update:

The last rating for this service was good (published 19 March 2020). At this inspection we rated the service as good.

Why we inspected:

We undertook this inspection as part of a random selection of services rated good and outstanding to test the reliability of our new monitoring approach.

Follow up:

We will continue to monitor information we receive about the service using our monitoring systems and we will re-inspect when indicated.

## 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.

### Is the service effective?

Good ●

The service was effective.

### Is the service caring?

Good ●

The service was caring.

### Is the service responsive?

Good ●

The service was responsive.

### Is the service well-led?

Good ●

The service was well led.

# Hands of Hope Health Care Limited

## **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 completed 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. At the time of this inspection twelve people were receiving support from this provider. 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.

#### Notice of inspection

This inspection was announced. 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 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 this information to plan our inspection.

#### During the inspection

We visited the offices of this service. We spoke with the registered manager. We inspected three care files and three staff files. We also reviewed a variety of records relating to the management of the service.

#### After the inspection

We spoke with two people who used the service and two relatives on the telephone about their experience of the care provided. We also spoke with two care workers and community nurse on the telephone. 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 key question has been rated Good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Preventing and controlling infection

- People's needs were assessed together with any potential risks in the provision of their care. Risk assessments contained information and guidance for staff to follow to reduce the risks identified such as with personal care and moving and handling.
- People and their relatives told us staff followed appropriate infection control procedures in order to help keep them safe. The registered manager confirmed that there were rigorous infection control procedures in place that staff had followed.
- We were assured that the provider was accessing testing for staff.
- The registered manager carried out regular checks of infection control practices to ensure staff followed current guidance and had access to a regular supply of PPE.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives said they felt safe with staff. People told us staff performed their duties with great care and sensitivity. One person said, "I have the same regular staff, who are very good, they are really careful, and I feel totally safe with them."
- Appropriate safeguarding policies and procedures were in place to protect people from the potential risk of abuse. The registered manager and staff were able to describe their responsibilities in this respect.
- Staff received training for safeguarding adults that they told us helped keep them up to speed with current best practice and legislation.

Staffing and recruitment

- There were comprehensive recruitment checks carried out before staff started working for the agency that helped to ensure people were supported by suitably skilled and experienced staff. These checks included references from previous employers, appropriate identity checks and Disclosure and Barring Service [DBS] checks.
- There were enough staff to support people safely and the registered manager also worked as a care worker when necessary.
- People told us that staff maintained good timekeeping and stayed for the agreed length of time. People and their relatives said that staff did everything that had been agreed with them and went the extra mile when that was needed.

Using medicines safely

- The registered manager told us that at the time of this inspection staff were not required to administer medicines to anyone as people's families or relatives did this for them. We were told however that staff had received training for the safe administration of medicines. This meant that when necessary people would

receive their medicines safely.

#### Learning lessons when things go wrong

- No accidents or incidents had occurred over the last year. The registered manager told us that there was a review system in place where discussions were held with staff if there were to be an incident so that lessons could be learnt to prevent similar incidents wherever possible.



# 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 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

- The provider carried out their own initial assessment of people's needs before agreeing the package of care. The information obtained through the assessment process helped the provider plan and deliver support to people, taking into consideration their health needs and the goals they wished to achieve.
- The registered manager regularly reviewed people's changing needs with people and their relatives and updated care plans and risk assessments accordingly.

Staff support: induction, training, skills and experience

- Staff understood their roles and felt confident in the training they received.
- Training covered topics such as first aid, health and safety, person centred care, food hygiene, mental capacity, safeguarding and dementia. Following the training the registered manager supported the staff to complete skills competency assessments.
- Staff completed the 'Care Certificate' during their induction. This meant people were being supported by staff who were trained in nationally recognised care standards.
- The registered manager carried out regular supervision with staff. Staff told us they felt supported in their work.

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

- People were supported to maintain a balanced diet. Staff considered people's specific dietary requirements where they occurred as well as their preferences and dislikes.
- A relative told us, "The staff know [my family member] well and they prepare their meals to their satisfaction".

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

- Staff told us they were well informed about people's healthcare needs and how best to support them to lead healthier lives. Care and support plans detailed the expected outcomes which were agreed with people.
- Staff worked closely with external health professionals to ensure people's needs and wishes were met.

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 followed the MCA process during the initial assessment of people's needs to ensure they were able to make decisions about their health and welfare. Where people were assessed as lacking capacity or had fluctuating capacity, there were appropriate representatives in place that could legally make decisions for someone if this was needed.
- Staff understood their responsibilities in relation to the MCA and they received annual training in this.

# 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 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 said staff were kind and looked after them really well. They said staff carried out their care and support effectively partly because they were well informed but also because staff developed a good rapport with people which aided the consistency of care they received.
- One relative said, "They care for [family member] so well. I have no worries about that at all. I know if there was ever a problem they would contact me and keep me informed".
- Staff received training in equality and diversity and understood people's needs.

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

- Staff provided care in line with people's preferences, including how they liked to receive their personal care and their food and drink. Staff told us "We are always fully briefed by the registered manager before we start providing care and support to a new person. Even so I always ask people if they need anything else or if they have any particular preferences on the day. This way I ensure I know how they need to be supported and know what they like and don't like".
- The registered manager told us they made telephone calls each month and carried out monitoring visits to speak with people and their relatives to find out their views on the quality of their care and if any changes were required.

Respecting and promoting people's privacy, dignity and independence

- People told us staff supported them to maintain their independence as far as possible. They said staff provided personal care support sensitively and always asked them how they would like to receive their support.
- A relative told us, "Staff are so good, they are very respectful and go out of their way to support my [family member] to the best of their abilities".
- Our discussions with staff showed they understood how to maintain people's confidentiality. Staff received training to understand their responsibilities in relation to this.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

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; Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People and their relatives said they were involved in the initial assessment and care planning and in any care plan reviews when they took place.
- Staff knew people's individual needs and preferences well as they worked closely with them and understood their risk assessments and care plans.
- Care plans were personalised, detailing health needs, backgrounds and people who were important to them. Care plans were kept up to date so they remained reliable for staff to follow.

### 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 provider met the AIS and key information was provided to people in alternative formats if necessary.
- The registered manager regularly spoke to staff about AIS and implemented appropriate methods of communication with people where required.
- Care plans detailed people's individual communication needs.

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

- There was an appropriate complaints policy and procedure in place that people and staff were aware of. People said they knew how to raise any concerns or complaints they might have and they said they were confident issues were dealt with quickly and swiftly.
- Where there were complaints, the registered manager was able to demonstrate what action was taken, in a timely way and resolved for all involved.
- Relatives told us that they knew how to raise concerns and were confident that they would be dealt with appropriately.

### End of life care and support

- At the time of our inspection no one was receiving end of life care. However, the registered manager told us they would work closely with the person, their relatives, the local hospice and others involved in their care.

# 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 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.

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

- The registered manager understood their role and responsibilities, as did the staff. The registered manager kept themselves up to date by attending regular courses on key topics.
- The quality assurance systems in place helped to ensure areas for improvement were identified and action taken to continuously improve the quality of the service provided.
- Staff were well supported with good training and one to one supervision.
- Regular monitoring visits of staff practice were undertaken by the registered manager. This enabled the registered manager to monitor how staff were working practically with the person as well as checking time keeping and monitoring their performance. In this way they were able to ensure improvements were made where necessary.
- There were systems in place to review incidents and accidents which helped to ensure action was taken to prevent a recurrence.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility.

- People and their relatives spoke positively about the service they received. They said staff were committed to providing good, high quality care. Comments we received reflected this. "I am very happy with the care I get, no complaints at all," and "The staff really care that is especially important for me," "The staff are really very supportive and caring." People said they felt listened to and were able to discuss any concerns they may have. They said there was an open and transparent culture at the service that met the needs of the people they supported.
- The registered manager understood their duty of candour responsibility to notify CQC appropriately of significant incidents including allegations of abuse and serious injuries.

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

- People told us they were fully involved in making key decisions about their care. They said any special requests or needs were taken seriously and where appropriate integrated into their care plans.
- People said the agency communicated very well with them but also said they were able to contribute suggestions as how the service could be improved. They told us they felt listened to.
- Staff told us they regularly spoke with people to ensure they were happy with the service they received.
- People told us they received good support from staff who were happy and committed to their work. They said they worked in an open and friendly culture. One staff member told us, "I really do love my job." Another

staff member said, "It's a good service, well managed and the staff team is supportive." Staff told us the registered manager dealt effectively with any concerns when they were raised.