

Midshires Care Limited

Helping Hands Wirral

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

Helping Hands Wirral is a care agency and provides personal care to people living in their own homes. At the time of inspection, the service provided care and support for 57 people.

Not everyone using Helping Hands Wirral receives a regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided. There were 28 people receiving personal care at the time of the inspection.

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

People and their relatives benefitted from caring staff which meant they experienced continuity of care. People were involved in making decisions about their care and where necessary staff used different ways to communicate with people to help them make decisions and participate in their care.

People's needs were comprehensively assessed before starting with the service. People and their relatives were involved in the care planning process. Staff had established supportive relationships with people and knew them well and people received person-centred care. Staff supported people to access healthcare professionals when required and supported people to manage their medicines safely.

People were supported to have utmost choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests.

People told us that the care staff were very caring, kind and their approach was always very positive. One person said, "I am so happy with the care they provide" and a relative told us that, "Carers respect his [relative] dignity."

Staffing levels were monitored and we received positive feedback about the timekeeping of staff and call duration times. The registered manager discussed about having the appropriate staffing and on-going recruitment process in place.

Staff were familiar with accident, incident and safeguarding reporting procedures. The provider ensured that all such incidents were investigated and follow up actions / lessons learnt were acknowledged.

Infection prevention and control (IPC) and COVID-19 procedures were in place. Staff received IPC training, were provided with the personal protective equipment (PPE) and were engaged in weekly COVID-19 testing regimes.

Safe medication administration procedures were in place. Staff were required to complete medication training and had regularly competencies monitored. The provider maintained effective oversight in relation

to medicine management.

Pre-employment recruitment checks were conducted; people received care and support by staff who had been safely recruited. Staff stated they were supported by the management team and received regular supervision and supported with learning and development opportunities

People and staff told us they thought the registered manager was doing a good job. They told us they were approachable, responsive and keen to make improvements. The registered manager showed us they were focused on continuity of staff and continually improving the service for the benefit of the people who used Helping Hands Wirral.

The service had an open and supportive culture. Systems were in place to monitor the quality and safety of care delivered. There was evidence of improvement and learning from any actions identified.

The provider and registered manager followed governance systems which provided effective oversight and monitoring of the service. These governance systems and processes were robust and identified areas of the service where improvements were needed.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk.

Rating at last inspection

This service was registered with CQC on 25 July 2019; this was the first inspection.

Why we inspected

This was a planned inspection following their registration with CQC.

Follow up

We will continue to monitor information we receive about the service until we return to our inspection 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 ●

Helping Hands Wirral

Detailed findings

Background to this inspection

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 carried out by two inspectors, and one '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 is a domiciliary care agency. It provides personal care to people living in their own homes.

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

We gave the service 24 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection. We visited the office location on 24 September 2021.

What we did before the inspection

We reviewed information we received about the service. We sought feedback from the local authority and professionals who work with the service. The provider was asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all the information to plan our inspection.

During the inspection

We spoke with the registered manager and four members of staff. We also spoke with five people who were receiving personal care and their relatives who were involved in their loved one's care packages. We reviewed a range of records, including three people's care records, medication administration records, as well as a variety of records relating to the management of the service.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at audit and governance data, as well a variety of policies and procedures.

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; Learning lessons when things go wrong

- Systems and processes ensured that people were safeguarded against the risk of abuse and lessons were learnt when things went wrong.
- People told us the service they received was safe. One person told us, "They [staff] are always polite and caring."
- Staff received safeguarding training and had a good understanding of how to keep people safe from abuse. Staff told us they felt confident to raise concerns and that the registered manager would act on them promptly.
- The provider ensured there were robust accident, incidents and safeguarding procedures in place. Staff completed the relevant reports, investigations took place when necessary and lessons were learnt and shared.

Assessing risk, safety monitoring and management

- Safety monitoring, assessment and management of risk was clearly established and regularly reviewed.
- The provider ensured that people were protected from harm and not unnecessarily exposed to risk.
- People had individually tailored risk assessments in place. We identified that some areas of risk required further detailed risk management plans. This was immediately responded to.

Staffing and recruitment.

- Staff recruitment processes were robust. We saw that there was sufficient numbers of care workers and a clear and easy to use scheduling and monitoring system in place.
- Staff files we looked at held the appropriate information needed for example, application forms and references, to ensure fit and proper persons were employed. New members of staff had been safely recruited using appropriate checks on their background and suitability for the role.
- Staff told us about their training completed as part of their induction and how they worked with experienced staff members until they felt comfortable to work alone.

Using medicines safely

- Safe medication administration procedures and arrangements were in place. There was a system in place that ensured and promoted safe management and administration of medication.
- Medication was administered by trained staff who regularly had their competency checked.
- Medication policies were complied with and staff followed medication administration guidance, ensuring people received medication support in line with their care plan.

Preventing and controlling infection

- The service had a COVID-19 specific policy and all staff had received training in infection control.
- People who used the service told us staff always wore personal protective equipment (PPE) during visits and staff confirmed they had access to adequate supplies.

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.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Each person's care and support needs, choices and preferences were assessed by senior member of staff.
- People received tailored care that was centred around their assessed needs, choices and decisions. People and relatives told us that staff encouraged full involvement from the person receiving care and dedicated the support around their needs and wants.
- Information from people's assessments was used to inform their care plans. This included details about people's background, faith and culture and anything else that was important to them such as what name they would like staff to call them.

Staff support: induction, training, skills and experience

- Staff received regular support, were fully inducted into their roles and encouraged to enhance their skills and experience. Staff told us that they were confident in asking for extra support or training.
- Staff were required to complete mandatory training courses as part of their roles and bespoke training was available if required. We saw that training was 100% compliant and in line with provider policy.
- Staff had supervision meetings with a senior member of staff, attended periodic team meetings and there was a system in place for annual appraisals.

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

- People's care records contained relevant, up to date nutrition and hydration information that staff could familiarise themselves with. Staff told us that they would access care records and check for updates for nutrition and hydration. A relative told us, "They talk to him about the importance of drinking enough."
- If people were identified as being at risk of malnutrition, this was risk assessed and guidance for staff was included as part of their care plan. The diet of people who may be at risk was recorded and regularly reviewed and if there were any concerns medical advice was sought.

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked effectively with other agencies to ensure that people received effective care and support. We saw examples of when effective communication with other agencies had led to improvements in people's care and support.

Supporting people to live healthier lives, access healthcare services and support

- People had access to other healthcare services, ensuring holistic care was provided. We saw evidence of district nurse, GP and community nurse involvement in some of the care packages we reviewed.

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.

- People were supported to make decisions for themselves and information on how people communicated their decisions was in their care plans.
- Consent for their care and support was sought and recorded and along with their consent to recording information about them to enable them to be cared for effectively.
- People's care plans recorded any advance decisions that people had made in relation to what medical treatment and support they wish to have if they were unable to make that decision in the future.

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 told us members of staff were very caring, kind, friendly and always took time to speak with them and ask how they are. It was clear that care staff had very positive and caring relationships with people. One relative told us, "Carers respect his personality and spend time sitting and talking to him."
- Support needs were established, and care was centred around their individual needs and wants. One relative told us, "The staff support her in a skilful way, we have a small list of carers that she knows and who understand her problems."
- Staff were familiar with the areas of support people required and how this needed to be provided.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy, provided dignified care and independence was promoted. A relative told us, "He is encouraged to be as independent as possible, to undress himself before his shower, he has a device to help him put on his socks and the carers encourage him to use it."
- Care records contained tailored information, staff were familiar with the level of care people needed and just how this needed to be provided.
- Confidential and sensitive information was protected, and data protection regulations were complied with.

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

- People were involved in regular reviews of their care with senior staff.
- One relative told us, "At the beginning, the Manager sat with us and we explained my wife's needs, she very quickly understood her condition and needs, care plans have been modified as her needs have changed."
- The provider had processes in place to encourage feedback from people who use the service which helped to improve the care and support.
- People told us that they were listened to and staff supported and encouraged them to express themselves. One relative told us, "He is sport and music mad; the staff make sure the television or music is available for him, and spend time talking to him about football."
- Care reviews took place regularly and quality assurance surveys were circulated. These assisted the provider to maintain a good level of care and make improvements where necessary.

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

- Each person had an individualised care plan that contained details of the care and support they needed; highlighting areas in which they were independent. These plans outlined how to meet people's needs and preferences.
- People told us that they had been involved in completing and regularly reviewing their care plans. We saw that people had requested meetings, either on the telephone or in person, to make changes and updates to their care plans.
- People's care, and support had been adapted, in partnership with people and health professionals involved in their care to help ensure that it met their needs.
- People were fully involved in the development of care records and contained individual person-centred information that staff could familiarise themselves with. For instance, 'Encourage me to participate in own personal care.'
- Staff, people and relatives told us that the provision of care was tailored around individual support needs. A relative told us, "Staff recognise my wife experiences memory loss and are friendly and smiling in an effort to put her at ease."
- People told us it was important to them that they had visits from staff who were familiar with them. We saw that staff with knowledge and experience of similar conditions were also supporting people with the same condition. One relative told us, "He has gained great comfort and confidence in the knowledge that the same three staff members, who understand and know my husband well, are providing his care and support."

Improving care quality in response to complaints or concerns

- Any concerns raised with or highlighted by a member of care staff were recorded and addressed using the electronic care planning system or by speaking to the management team. Staff told us, "We recently became concerned about not having the right equipment for someone we support. We spoke to the manager who set up a meeting with the person, their family and social worker to assess and see what equipment was needed."
- The service had a culture of open and honest discussions, so any issues were dealt with immediately.
- The service had a robust complaints policy in place. We saw an easy read guide for people, explaining what they could do if they were not happy with something.

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.

- People's communication support needs were fully established at the assessment stage.
- Care records contained relevant communication information that staff needed to be aware of. For instance, one care record stated, 'I like to talk about my children and look at their photographs.'
- Information about people's communication needs was easily accessible for staff in the 'All about me' section of the care files.
- Each person's care plan contained information for staff on how people communicated, how they may indicate decisions and how they give consent to their care and support and we saw that this was updated regularly.
- People received information in a variety of ways, including in writing, by email and in person during visits from senior staff. People could also access their own care records and see any updates.

End of life care and support

- If people chose, they could be provided with end of life care in their own homes. We were told that this would be provided in partnership with medical professionals.

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

- The service was consistently well-led. The culture was open, inclusive and people were supported to make decisions about the level of care they received.
- Staff were proud to work for Helping Hands Wirral. One member of staff told us, "The management are supportive, and it is really good. I am very happy. The customers are great, and I enjoy it and everyone we support." Another member of staff told us, "It is really well-run and really feel part of the team and feel valued. One of the best companies I have worked for."
- People were encouraged to remain empowered and were supported to maintain a good quality of life.
- Management respected all staff, and staff wellbeing and work/life balance was considered paramount. The registered manager spoke positively about their flexibility with shifts, especially in context of the COVID-19 pandemic and the stresses and strains this has caused. The registered manager and management team clearly understood the difficulties and challenges.
- Helping Hands Wirral had engaged and liaised with people, relatives and public about the provision of care being provided.
- Quality assurance questionnaires were circulated regularly to gather the views, opinions and suggestions in relation to the care being provided. We saw that feedback was reviewed and responses were provided.

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

- There was a focus on continuous learning and improvement. We saw that the service was pro-active in engaging with other agencies and local groups to achieve the best possible future outcomes for people who used the service. We saw the manager had liaised with local schools and businesses to discuss projects to design support tools for people with various care needs at Helping Hands Wirral.
- There was well embedded comprehensive quality assurance audits that were undertaken on a regular basis. Effective systems were in place to identify and manage any risks to the quality of the service.
- Constructive feedback was given to staff following audits that supported and promoted quality improvement throughout the service.
- When incidents occurred, lessons were learnt and actions implemented in a timely manner. These lessons were effectively shared with staff to support their development.

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

- Management understood their regulatory responsibilities and the need to be open and honest.
- There were clear roles and responsibilities within the organisation.
- Open and honest relationships had been developed and the people and relatives told us that there were effective methods of communication in place.