

Hope Care Service Agency Ltd

Hope Care Service Agency

Inspection report

17 Morris Walk, Pilgrove Way
Cheltenham
GL51 0SQ

Tel: 01242382888

Website: www.hopecareserviceagency.co.uk

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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

Hope Care Service Agency is a domiciliary care agency providing personal care to people living in their own homes. Not everyone who used the service received personal care. CQC only inspects where people receive personal care, which is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of our inspection there were 2 people receiving personal care support.

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

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.

Right Support:

Staff helped people to live as independently as possible. People were supported to have maximum choice and control of their lives. Staff provided them with care in the least restrictive way possible and in their best interests; the policies and systems in the service promoted this practice. Staff enabled people to access specialist health and social care support in the community. Staff supported people with their medicines in a way that promoted their independence and achieved the best possible health outcome. Staff assisted people to play an active role in maintaining their own health and wellbeing.

Right Care:

Staff promoted equality and diversity in their support for people. They understood people's cultural needs and provided culturally appropriate care. People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to people's individual needs. Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training in how to recognise and report abuse and they knew how to apply it. People's care, treatment and support plans reflected their range of needs, and this promoted their wellbeing and enjoyment of life.

Right Culture:

People received good quality care, support and treatment because suitably trained staff and specialists were able to meet their needs and wishes. Staff knew and understood people well and were responsive, supporting their aspirations to live a quality life of their choosing. Staff placed people's wishes, needs, and rights at the heart of everything they did. Staff evaluated the quality of support provided to people, involving the person, their families, and other professionals as appropriate. The service enabled people and those important to them to work with staff to develop the service. Staff valued and acted upon people's views.

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 us on 25 April 2022 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Hope Care Service Agency

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 was carried out 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

We gave the service a 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 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 looked at records relating to the management of the service. We looked at care and support files for 2 people and 1 staff member's recruitment records. We contacted 1 person and 2 people's relatives and 1 person's friends to obtain their opinion on the quality of care provided by the service.

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 of 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

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. A member of staff told us, "I would report to the registered manager and depending on if I have witnessed the abuse or suspected the abuse, I would inform the registered manager so she could do an investigation and call the police, report it to adult safeguarding and inform the CQC. I would inform the service user that I would have to tell my manager and that she would have to take action."
- Staff had training in how to recognise and report abuse and they knew how to apply it.
- People and their relatives had safeguarding information in a form they could use, and they knew how and when to raise a safeguarding concern.

Assessing risk, safety monitoring and management

- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well.
- The service helped keep people safe through formal and informal sharing of information about risks.
- People's care records helped them receive the support they needed because it was easy for staff to access and keep high quality clinical and care records. Staff kept accurate, complete, legible and up-to-date records, and stored them securely.

Staffing and recruitment

- Staff recruitment and induction training processes promoted safety. Staff knew how to take into account people's individual needs, wishes and goals.
- The numbers and skills of staff matched the needs of people using the service.
- People received care and support from suitably skilled and experienced staff.

Using medicines safely

- People were supported by staff who followed systems and processes to prescribe, administer, record and store medicines safely.
- Staff had completed safe handling of medicines training. The provider conducted regular checks to confirm staff remained competent to support people with their medicines.
- People were supported to take their medicines safely. People's care plans contained information about what their medicines were and what level of support they required.

Preventing and controlling infection

- Staff used personal protective equipment (PPE) effectively and safely.

- Systems were in place to protect people from the risk of infections because staff were trained in infection prevention and control.
- All relevant staff had completed food hygiene training and followed correct procedures for preparing and storing food.

Learning lessons when things go wrong

- The service had processes to learn from incidents and accidents. The manager understood how to use the information as a learning opportunity to prevent reoccurrences.
- Staff understood their responsibility to report incidents and allegations promptly. A member of staff said they would contact the manager immediately if a safeguarding concern arose.

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. 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

- Staff completed a comprehensive assessment of each person's physical and mental health before they started using the service.
- People had care and support plans which were personalised, holistic, strengths-based. The plans reflected their needs and aspirations, and included their physical and mental health needs. People, relatives and staff reviewed plans regularly together.
- Staff ensured people had up-to-date care and support assessments, including medical, psychological, functional, communication preferences and skills.

Staff support: induction, training, skills and experience

- People were supported by staff who had received relevant and good quality training in evidence-based practice. This included training in safeguarding adults, food safety, privacy and dignity, skin integrity, stroke awareness, fire safety, and equality and diversity.
- The service checked staff's competency to ensure they understood and applied training and best practice.
- Staff told us their induction was thorough and as a result they were able to meet people's needs. A member of staff told us, "My introduction consisted of an induction period and shadowing of two weeks, where I shadowed the registered manager at the service users I was going to visit. I read the care plans and protocols, so I knew exactly what to do. I did training before I started. It was helpful as I got to learn their routines, and the way they liked to do things, and I picked it up very quickly. I found it very interesting and useful, and I adapted very quickly."

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

- People received support to eat and drink enough to maintain a balanced diet.
- People were involved in choosing their food, shopping, and planning their meals.
- Care plans we reviewed contained detailed information for staff about support people required with eating and drinking, and included known risks and people's preferences.

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

- People were referred to health care professionals to support their wellbeing and help them to live healthy lives.
- Staff worked well with other services and professionals to prevent readmission or admission to hospital.
- People's care plans contained information about other agencies and professionals involved in people's

care and their contact details should staff need to update them on any concerns.

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 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 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.

- Staff empowered people to make their own decisions about their care and support.
- Staff demonstrated best practice around assessing mental capacity, supporting decision-making and best interest decision-making. A member of staff told us, "Everyone has the right to make their own decisions, and we should support people to make their own decisions. There are 5 main principles of the Mental Capacity Act 2005, and we can never assume someone lacks capacity unless proven otherwise. If someone lacks capacity to make decisions, then the decision must be made in their best interest."
- We found the service was working within the principles of the MCA. We saw consent to care and treatment, and information sharing in line with the law and guidance was recorded in people's care plans.

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 and their relatives told us staff treated them well. One person's relative told us, "[Person] really looks forward to his daily contact with the two carers, he considers them friends and this consistent contact with the same two people is a very important part of his routine and his mental well-being and something that is important to me, too. Both carers are kind and respectful to [person]."
- People's relatives and friends told us that staff members showed warmth and respect when interacting with people.
- People received kind and compassionate care from staff who used positive, respectful language which people understood and responded well to.

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

- Staff respected people's choices and wherever possible, accommodated their wishes, including those relevant to protected characteristics, e.g. due to cultural or religious preferences.
- People and those important to them took part in making decisions and planning of people's care and risk assessments. One person's friend told us, "As a friend, yes (I'm involved in the person's care)."
- People were empowered to make decisions about the service when appropriate and felt confident to feed back on their care and support.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity, privacy and respect. One person's friend told us, "Yes, they are very respectful!"
- Staff knew when people needed their space and privacy and respected this.
- Records relating to people's care were kept confidential and staff understood the importance of discussing people's care in private.

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

- People's person centred needs were met, including those with needs relating to protected characteristics.
- The service was flexible and responsive to people's needs. For example, one person had surgery booked for 7a.m.,. The registered manager went to their house at 5:15 a.m in person to assist them with their personal care needs and preparing for surgery. Staff often stayed over their allocated time, especially if people were feeling lonely and required company.
- Care plans were regularly reviewed to ensure they held the most up-to-date information. When needed, care plans were amended promptly as changes occurred.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Staff ensured people had access to information in formats they could understand.
- People's preferred method of communication was clearly recorded within their care plans. This enabled staff to communicate with people in a way they understood.
- The provider had appropriate arrangements in place to provide information in accessible formats, including a detailed policy regarding their responsibilities in relation to the AIS.

Improving care quality in response to complaints or concerns

- There were no complaints recorded since the service registered with CQC. People and their relatives told us they were aware of how to raise complaints, however, they had had no reason to do so. One person's relative told us, "I have never had to make a complaint, but if I did, I would use the current method of communication that is in place."
- People, relatives and friends, could raise concerns and complaints easily and staff told us they would support them to do so.
- Staff were committed to supporting people to provide feedback so they could ensure the service worked well for them. Staff were aware of raising concerns on behalf of people. A member of staff told us, "I had a concern for a service user, which I reported, and [registered manager] dealt with the situation very quickly and appropriately. Information about the issue was shared with the correct people, such as a next of kin. If I had any other concerns, I know that [registered manager] would deal with it satisfactorily."

End of life care and support

- At the time of the inspection, the service was not supporting anyone with end-of-life or palliative care needs.
- The registered manager said they would work alongside other health professionals if care was needed in this area.
- Staff told us people's advanced wishes would be respected.

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

- The registered manager worked hard to instil a culture of care in which staff truly valued and promoted people's individuality, protected their rights and enabled them to develop and flourish.
- Managers were visible in the service, approachable and took a genuine interest in what people, staff, family, and other professionals had to say. A member of staff told us, "I feel listened to and heard. [Registered manager] as a boss is perfect. [Registered manager] is also there for me if I have personal issues also."
- Management and staff put people's needs and wishes at the heart of everything they did. One person's relative told us, "I was very impressed and felt that they were not only very organised and professional, but more importantly, they actually cared about their clients. We had an in-depth meeting about [person] and I was asked about their likes dislikes, their background and what their needs were and what their skills were (as they have a learning disability), they met [person] to make sure they were happy with what the service would be providing."

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 provider understood their responsibility around the duty of candour and of the requirement to notify appropriate agencies including CQC if things went wrong.
- Staff gave honest information and suitable support, and applied duty of candour where appropriate.
- There were appropriate policies and procedures in place to respond to incidents, safeguarding alerts and complaints.

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

- The registered manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs. People and their relatives praised the registered manager and the quality of care provided by the service. One person's relative told us, "Overall, I could not wish for a better service and if I were giving them marks out of ten it would be ten."
- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support
- The registered manager understood and demonstrated compliance with regulatory and legislative requirements.

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

- The provider sought feedback from people and those important to them, and used the feedback to develop the service.
- People and their relatives told us the communication with the service provider was good. One person's relative told us, "Communication is excellent with regular emails or phone calls and also a monthly update that tells me about [the person's] general well-being, how they are feeling etc."
- The registered manager said they had an 'open door' policy and staff knew they would be available to listen to any concerns and provide solutions to address these.
- Staff told us they felt supported and valued by the registered manager. A member of staff told us, "She is supportive, always there for me - not to just deal with workwise but also with lone working as it is lonely and can be quite depressing, so I know if I was to ring her, she would be very supportive and there for me. I feel very valued and supported. [Registered manager] shows appreciation for my work and has treated me to spa days and having my nails done."

Continuous learning and improving care; Working in partnership with others

- The provider had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible.
- The service worked in partnership with people, their relatives, people in the local community, the local authority and other professionals. This enabled people to access the right support when they needed it and we saw working collaboratively had provided staff with up-to-date professional guidance.